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18 March 1985

# Worldwide Report

EPIDEMIOLGY



FOREIGN BROADCAST INFORMATION SERVICE

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18 March 1985

## WORLDWIDE REPORT

### EPIDEMIOLOGY

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BANGLADESH

MOSQUITOES CAUSE MALARIA RISE IN CHITTAGONG

Dhaka THE BANGLADESH OBSERVER in English 11 Jan 85 p 7

[Text] Chittagong, Jan 10--Mosquito menace has increased in Chittagong city. The measures to eradicate the menace appear to be inadequate and ineffective. The city dwellers are suffering.

The situation takes serious turn after sunset when swarms of mosquitoes raided the houses. Students, people living on the pavements and in slum areas are the worst sufferers.

Ditches and ponds filled with hyacinths drains service latrines, uncleaned dustbins and stagnant waters are the ideal breeding grounds of mosquitoes. The heaps of garbages are to be found on the city thoroughfares. The breeding grounds are specially located in Dewanhat, Nalapara, Dampara, Mehdibagh, Sholoshahar, Haliashahar, Chaktai, Bakulia, Firingi, Bazar and Dhanialipara of the city.

It is said that a mosquito can fly nonstop three miles from its breeding place. It is easy for these tiny insects to go to those places where the breeding grounds are absent.

Mosquito is the bearer of germs of malaria. The Chittagong Medical College Hospital is now admitting at least five malaria patients every day.

The Chittagong Municipal authority seems to be indifferent towards this problem. Although the authority has on its payroll 30 employees for spraying insecticides, they hardly take trouble to undertake the work. They seldom visit residential areas of the city.

The city dwellers are also partly responsible for increasing the menace. The dwellers particularly in old areas keep some portions of their homesteads vacant. Ditch and drains filled with garbages are not cleaned regularly.

CSO: 5450/0079

BANGLADESH

BRIEFS

BAGERHAT DYSENTERY OUTBREAK--Bagerhat, Jan 10--Dysentery and Diarrhoea have broken out in an epidemic form in different areas of Bagerhat district. Paucity of pure drinking water and use of adulterated foodstuff are said to be the main reasons for the sudden outbreak of the diseases. Acute scarcity of curative and preventive medicines in the district has aggravated the situation. A ten-day long eye-camp was held at Chitalmari Boys High School complex under the auspices of the Rotari Club. The eye camp which was formally inaugurated by the UNO Chitalmari was attended by the specialists of Andha Kallavan Samity. A large number of eye patients from different parts of the Elaka attended the camp for treatment. A total of 817 eye patients were given outdoor treatment and 70 cataract patients were operated on. [Text] [Dhaka THE BANGLADESH OBSERVER IN English 14 Jan 85 p 9]

JAMALPUR DIARRHEA EPIDEMIC--Jamalpur, Jan 14--Diarrhoea has broken out in at least seven upazilas of Jamalpur district and five persons died in Madarganj and Dewanganj upazila. It is gathered that hundreds of persons have been attacked by the disease and the number of death is likely to increase. Meanwhile, the disease has been spreading to new areas. The condition of the affected patients is reportedly worsening particularly for want of necessary medicines. Patients admitted with the Upazila Health Complex are not getting proper medicare. And the patients are required to buy medicines from outside. In Madarganj Upazila Health Complex patients have to purchase even kerosine oil for lighting purpose at night. Bed sheets of one patient is being given to another patient without proper washing. According to local medical practitioners diarrhoea is likely to spread further all over the district and may take serious turn if urgent steps are not taken to prevent it immediately. [Text] [Dhaka THE NEW NATION in English 16 Jan 85 p 2]

MORE DIARRHEA REPORTED--Nilphamari, Jan 14--Three children died of strong diarrhoea that has broken out in Kishoregonj union under Nilphamari district, it is reliably learnt. In course of last two days, another 30 persons have reportedly fallen victim of this disease. The civil surgeons office, however, told this correspondent that a medical team equipped with necessary medicine has already been sent to the affected area to render succum to the victims of the disease. Our Bharab Correspondent adds: Dysentery and diarrhoea have broken out in an epidemic form in different parts of Bhairab upazila. Paucity of pure drinking water and use of

unadulterated foodstuff are said to be the main reasons behind the sudden outbreak of the diseases. It is learnt that acute scarcity of curative and preventive medicines in the upazila have aggravated the situation. When contacted, the upazila health authority said that necessary measures have been taken in the affected areas. /Text/ /Dhaka THE NEW NATION in English 17 Jan 85 p 2/

**BACILLARY DYSENTERY OUTBREAK--**Thakurgaon, Jan 18--Blood dysentery have broken out in an epidemic form in five upazilas of Thakurgaon district and 146 people have died of the disease during the last two months, it is learnt. According to an unofficial report, 56 persons died in Baliadangi upazila, 34 in Pirgonj, 27 in Haripur, 15 in Ranisankail and 14 in Thakurgaon upazila. It is learnt that upto now about 3,000 people of the areas have been attacked with the disease. Local physicians maintain that scarcity of pure edible oil is the main cause behind the disease, impure drinking water being the other reason. It has been alleged by local people that most of the victims died without being provided any medical treatment. The hospitals also could not render any effective service for want of sufficient quantity of medicine. Even in the open market, saline scarcity prevails. /Text/ /Dhaka THE NEW NATION in English 21 Jan 85 p 2/

**NANDAIL CHOLERA EPIDEMIC--**Netrakona, Jan 21--Cholera has broken out in Betagair Union under Nandail upazila in an epidemic form. Six persons including two children died of the disease. The victims are Md Janab, his two sons, Fazar Ali and Hossain Ali and two children of the family of Khitish Chandra Saha. Besides, a good number of people including children are suffering from the disease in the union. It is reported that acute scarcity of medicine and paucity of drinking water have been prevailing in the locality. Preventive measures is urgently needed. /Text/ /Dhaka THE BANGLADESH TIMES in English 22 Jan 85 p 2/

**DIARRHEA, DYSENTERY OUTBREAKS--**Rajbari, Jan 20--Dysentery and Diarrhoea broke out in an epidemic form in different areas of Rajbari Sadar Upazila. Paucity of pure drinking water and consumption of adulterated foodstuffs are said to be the main reasons for the sudden outbreak of the diseases. Acute scarcity of medicines in the upazila has aggravated the situation. /Text/ /Dhaka THE BANGLADESH OBSERVER in English 24 Jan 85 p 7/

CSO: 5450/0085

BERMUDA

FLU INCIDENCE 'EPIDEMIC' IN FACE OF VACCINE DROUGHT

Absence of Vaccine

Hamilton THE ROYAL GAZETTE in English 14 Jan 85 p 1

[Text]

A worldwide shortage of flu vaccine has meant none will be available in Bermuda this winter.

But Government's Chief Medical Officer, Dr. John Cann, would not say if lives would be at risk.

The Health Department has been trying desperately to get hold of vaccine for several months but without success.

Dr. Cann said: "There are no supplies available at the moment and we are unlikely to get any." He said there were a multitude of reasons why vaccines were unavailable but would not go into detail.

And he said all physicians had been informed of the impending shortage before Christmas and patients had been told.

One reason is believed to stem from a cut-back in production by North American manufacturers following the swine flu scare in the mid 1970's.

Then several court cases were brought against the manufacturers, alleging the vaccine had caused serious health prob-

lems, including brain damage.

The vaccine was immediately taken off the market both in the United States and here.

Now according to a leading doctor in Bermuda, manufacturing companies will only supply in bulk -- far exceeding this country's needs.

Before the swine flu controversy, up to 5,000 people were vaccinated every year, including police, emergency service workers and the elderly.

That figure dropped dramatically to only a few hundred, with the elderly and sick getting priority.

Now even they will be unable to be vaccinated. The doctor, who did not wish to be named, said the Health Department had played the whole issue down and kept it as low key as possible.

Doses of vaccine have to be ordered some months in advance, usually from Britain or North America.

## Impact of Illness

Hamilton THE ROYAL GAZETTE in English 1 Feb 85 p 1

[Text]

Bermuda has been hit by an influenza epidemic, the Island's top doctor confirmed yesterday. But he denied lives may be at risk because of a shortage of vaccine.

Government's Chief Medical Officer Dr. John Cann said hundreds of people in schools, colleges, hospitals and offices have been hit by the bug.

"Technically we have an epidemic. In the past few weeks we have had a large number of people falling ill, but the figures cannot be quantified."

But he claimed there were enough doses for high risk patients although these can only be obtained by prescription from general practitioners.

Two weeks ago there was no vaccine available at all, and even now less than 600 doses are available.

"I cannot say there is no risk to the general population, but statistically that risk is very low," said Dr. Cann.

He confirmed there were only a "few hundred" doses available in Bermuda this winter.

The King Edward VII Memorial Hospital has postponed all non-emergency operations for the time being

to make extra beds available.

The elderly and those with chronic chest complaints and heart and kidney diseases are among those in the "high risk" category.

Schools have reported a large increase in absences because of the flu, the same strain which has been causing havoc in the United States.

Bermuda College and the Bermuda High School for Girls both confirmed many students and teachers had gone down with the illness.

Dr. Archie Hallett, the principal of Bermuda College, said about 50 students, lecturers and administration staff have been away. "But we are still managing to keep going," he said.

And at Bermuda High School, headmistress Miss Jean Myerscough said over 20 pupils were absent yesterday. "But that is normal for this time of year. If it gets too serious we inform the health department," she said.

Dr. John Rounthwaite, the medical director at King Edward, said some staff had reported sick, but not as many as in previous years.

Usually at this time of year non-emergency operations were postponed in case

of problems, he added.

Dr. Cann said supplies have been scarce because manufacturers will only supply doses in bulk which is uneconomical for a country of Bermuda's size.

In normal years sufficient vaccine is available to anyone who wants it, but Dr. Cann said he wouldn't recommend it for healthy young people.

"We don't stop people taking it if they want it, but we don't promote it. However there is sufficient now for people who need it. I think it is stretching things to say people may die because of the shortage," he added.

"In Bermuda we have had serious problems, but it is sometimes difficult to say that an elderly person who succumbed after a bout of flu died because of the flu. It is not always clear."

He said it was important to emphasise that the majority of cases were very mild.

The symptoms are fever, a chill, aching muscles, tiredness and a high temperature. A bout lasts between two and six days usually and the best cure is simply plenty of rest.

January Caseload

Hamilton THE ROYAL GAZETTE in English 2 Feb 85 p 3

[Excerpts] Health officials on the Island received reports of 194 cases of influenza during January and the bug's grip on Bermuda shows few signs of abating.

As peak flu season continues, there will undoubtedly be many more people developing a sore throat and cough, aching muscles, a fever and a general feeling of fatigue.

Although Bermuda does not have the sort of testing facilities required to determine exactly which strain of the virus has arrived on the Island, the symptoms are similar to the Philippine-based flu now inflicting itself on victims in the US and Britain.

"That strain is a Type A (H3N2)," the Department spokeswoman said.

CSO: 5440/036

BOLIVIA

USSR DONATES LARGE AMOUNT OF POLIO VACCINE

La Paz HOY in Spanish 22 Dec 84 p 3

[Excerpts] The Soviet ambassador to Bolivia, Kujov Arkabi, presented the Bolivian Red Cross with 300,000 poliomyelitis vaccines.

The ceremony took place last Thursday and was attended by the Minister of Social Welfare and Public Health, Javier Torrez Goitia, Bolivian Red Cross president, Alvaro Carranza, and other guests.

The donation is part of a total of 1.2 million vaccines pledged by the USSR government to Bolivia, with a view to intensifying the campaign against that disease.

The donation was made after negotiations carried out by the president of the Bolivian Red Cross. An agreement was signed which also provides for the donation of kits with emergency supplies.

On behalf of the Bolivian Red Cross, the president of the organization expressed his gratitude for the gift, which will provide the impetus needed to completely eradicate the disease from the territory, according to national authorities.

The immunization campaigns Bolivia has been conducting to eradicate the disease should be supported by nations interested in finding a definitive solution to the problem, the Soviet diplomat indicated.

[Caption:] Soviet Donation. A shipment of 300,000 poliomyelitis vaccines was donated to the Bolivian Red Cross by Soviet Ambassador Kujov Arkadi at a ceremony last Thursday attended by public health officials.

9805  
CSO: 5400/2019



BOLIVIA

BRIEFS

CHAGAS DISEASE INCREASE ALARMING--Santa Cruz. There has been an alarming increase in the incidence of Chagas disease, according to Benjamin Rivera, director of the National Tropical Disease Center (CENETROP). The head physician explained that increasing numbers of people are afflicted with the disease, particularly in rural areas, because Bolivia is one of the few countries which has never initiated a campaign against Chagas' disease. He explained that CENETROP is currently conducting a study on this disease in Vallegrande, with a view to determining the scope of the disease. It also has equipment and supplies for treatment. He indicated that Santa Cruz department has the fourth highest incidence of Chagas' disease, and said that there are two ways to prevent the disease: educating the people to combat the barbeiro, and improving housing and hygiene. [Text] [La Paz HOY in Spanish 23 Dec 84 p 4] 9805

CSO: 5400/2019



CANADA

INCREASE IN CANADIAN CASES OF AIDS REPORTED

Ottawa THE CITIZEN in English 3 Jan 85 p A2

[Article by Jane Defalco]

[Text]

Canadian cases of the deadly disease AIDS almost tripled last year, from 38 in 1983 to 109 in 1984, a Health and Welfare official said Wednesday.

Dr. Alastair Clayton, head of the federal Laboratory Centre for Disease Control, said 67 per cent of all adult cases of Acquired Immune Deficiency Syndrome ever reported in Canada occurred in 1984.

But he expects last year's increase will level off soon, as it did in the U.S. about 18 months ago.

Canada is about 18 months behind the U.S. in the spread of AIDS but follows the U.S. pattern, he said.

"They are still increasing, but not at the same quick rise we're having."

As of Dec. 3, 1984, there were 7,136 U.S. cases and about 48 per cent have died.

The disease destroys the body's immune system, leaving victims susceptible to several infections, including a rare form of pneumonia and a type of cancer. It mainly affects homosexuals, recent immigrants from Haiti, intravenous drug users and hemophiliacs.

Clayton said 43 cases were reported in the last three months of 1984.

But he said it's impossible to pinpoint any reason for the large increase because scientists still don't know what causes the disease or how it spreads.

So far, about 52 per cent of all 162 Canadians with AIDS have died.

Victims rarely live longer than three years once the symptoms of the disease appear, usually from three months to five years after it invades the body.

The first Canadian case of AIDS was reported in February, 1982. There were 14 other cases that year.

Since then, Clayton said the disease has continued to nearly double every six months.

Researchers studying AIDS have recently discovered the virus keeps changing its structure, which makes it almost impossible to develop a vaccine to fight it.

Scientists still can't even test for AIDS before symptoms appear. However, a new U.S. test can detect antibodies that fight Human Lymphotropic Virus, considered to be the most likely cause of AIDS.

If these antibodies are found in blood, it means the body has at one time had the AIDS virus, said Clayton.

"It doesn't tell us if the person has got AIDS or will get AIDS, but it will be useful once it's commercially available to screen potential blood donors."

He said people with these antibodies would not be allowed to give blood, since AIDS is now known to be spread through blood transfusions.

Clayton said Health and Welfare will soon purchase several machines so hospitals and clinics across the country can gauge how far advanced an AIDS victim's symptoms are.

Of the 109 Canadian cases in 1984, 11 victims were women. Seven were Haitians, one contracted the virus through a blood transfusion and the remaining three were not from the groups identified as likely to get AIDS.

CSO: 5420/15

CANADA

## PASTEURIZING PLASMA CONCENTRATES PROPOSED IN AIDS BATTLE

Toronto THE GLOBE AND MAIL in English 24 Dec 84 p 9

[Article by Joan Hollobon]

[Text]

Blood-clotting products used by hemophiliacs in Canada are to be pasteurized to protect against transmission of the viruses believed responsible for spreading AIDS — acquired immune deficiency syndrome.

The bureau of biologics of the federal Health Protection Branch issued a directive Nov. 16 requesting the Canadian Red Cross Society to shift to heat-treated plasma concentrates "as soon as possible."

Hemophiliacs, or "bleeders," require frequent injections of substances concentrated from plasma (blood fluid) to stop spontaneous hemorrhages into joints or uncontrollable bleeding resulting from injury. The most frequently required are called Factors VIII and IX.

Pasteurized concentrate may become mandatory as early as next May, but at the moment it is only a recommendation, a Health Protection Branch official said.

The Canadian Blood Committee, a co-ordinating body composed of representatives of federal and provincial governments, industry, the Canadian Red Cross Society and other health bodies which recommended the date, continues to meet to work out ways to introduce the new procedure.

Dr. Martin Davey, assistant national director of the CRC blood service, said the Red Cross timetable provides for introduction of the heat-treated concentrate in May and exclusive use by July.

Several months lead time is required for the manufacture of Factors VIII and IX from receipt of the plasma to the finished product. The Red Cross has in stock a substantial amount of "therapeutically effective" material that, in the meantime, will continue to be used.

Connaught Laboratories Ltd. in Toronto processes about half the blood plasma collected by the Canadian Red Cross; the other half is sent to North Carolina for manufacture of concentrate by a U.S. firm, Cutter Laboratories Inc.

The CRC collects between 150,000 and 160,000 litres of plasma a year. The new heat-treated process will use more plasma to produce the same amount of concentrate.

The new process will also raise costs by 20 to 30 per cent, increasing the price to the Ontario Government to at least \$6.5-million a year from about \$5.5-million.

There is some question whether Connaught Laboratories will continue to manufacture Factor VIII and factor IX, until advances in biotechnology enable the clotting factors to be made by genetic engineering techniques (which avoid the use of plasma), probably in four or five years.

Dr. Davey said it appears Cutter can increase its supply to meet Red Cross needs.

Canadian self-sufficiency in the life-saving material concerned governmental officials four years ago when the Red Cross signed a contract with Cutter, but Dr. Davey said there has never been any difficulty in getting the concentrate.

Under its contract with Cutter, the Red Cross can enforce return of material made from Canadian plasma supplied to Cutter for fractionation "so we are assured at least of about half our supply from that source," he said.

Canada will be nearer self-sufficiency when the Winnipeg Rh Institute, a new laboratory associated with the University of Manitoba, begins production soon.

In Canada, only one hemophiliac among the estimated 2,500 to 3,000 is known to have died of AIDS.

Pasteurization of blood plasma was developed to combat possible contamination with hepatitis virus.

CSO: 5420/15

CANADA

## HIGH-LEVEL SULPHATE EMISSIONS LINKED TO HEALTH PROBLEMS

Vancouver THE SUN in English 19 Jan 85 p A14

[Text]

TORONTO (CP) — High levels of sulphate pollution, the main component of acid rain, cause 30 to 40 people in southern Ontario to require hospital care on hazy summer days, a new study suggests.

Dr. David Bates, a professor of medicine with the University of British Columbia, bases his statement on examination of hospital admission records, hourly weather reports and air pollution readings between 1974 and 1982.

The records of 79 hospitals between Windsor and Peterborough were studied along with the climate and pollution readings from 30 weather stations across the 500-kilometre span between the two cities.

Bates found that on a normal summer day, there were about 2,400 people admitted to hospital, with about 50 complaining of respiratory problems.

"But on one day or two you suddenly see about 80 or 90."

Bates admits there is "much more of this story that I don't fully understand." But he said the presence of sulphate seems to signify that a still-unknown relationship exists between the human body and the emissions of sulphur and nitrogen oxide in acid rain that can damage health.

"In a population of 5.9 million, 40 is a small number," said Bates. "You aren't going to see people lying down in the street."

"But for every one admitted there will have been someone who went to emergency and another four or five who increase their

medication. It is not a disaster . . . but it's a preventable disease."

Despite Bates's qualifying statements, Michael Perley, of the Canadian Coalition on Acid Rain, said the study "is the most substantive and the most serious evidence to date that the acid rain problem causes human health problems."

Clean air standards in the United States are based primarily on the impact of pollutants on human health. And Perley said members of the U.S. Congress have told the coalition that only a clear link between acid rain and health effects will bring a national consensus for change.

Morton Lippman, a professor of environmental medicine in New York, said Bates' study, which is still to be published, "is having an impact on the U.S. regulatory scene."

Bates said the overall environmental effects of acid rain, blamed for damaging many lakes and forests, point to the need to cut down sulphate pollution.

"It is fairly convincing," he said. "We know where these pollutants are coming from. The latest U.S. data tells us we are looking at emissions from 400 major power plants, so that the control problem is a matter of political will."

The Canadian government has made repeated pleas to the U.S. government to take steps to control its sulphur emissions from coal and oil-fired electrical power plants, but President Ronald Reagan's administration has said more evidence of damage is needed.

CANADA

THREE STRAINS OF LEGIONELLA UNCOVERED AT WINDSOR HOSPITAL

Windsor THE WINDSOR STAR in English 25 Jan 85 p A3

[Article by Dave Pink]

[Excerpt]

Three different strains of legionella bacteria were discovered in the water supply at Hotel Dieu, Windsor-Essex County Health Officer Dr. Joseph Jones said Thursday.

The presence of the legionella bacteria was discovered last fall when five patients at the hospital were believed to have contracted legionnaires' disease. One, an 88-year-old woman, died.

SUBSEQUENT tests on the hospital's water supply showed the presence of Strain 8, one of the eight known strains of legionella, Dr. Jones said at a meeting of the health unit. Strains 1 and 6 had been discovered earlier, he said.

He said there have been no reported outbreaks of the disease in the past two months, but hospital staff are continuing to monitor the building.

"Until there's a final solution we're letting their staff do the swabbing."

Dr. Jones said. "It's a system of rou-

tine checks — and we'd like to do some other checks, in certain areas where a nurse might not get at."

He confirmed the legionella was discovered in shower heads in the hospital, but said it is still not known how the bacteria entered the hospital. While controls for the bacteria have been developed since it was first discovered in 1975, Dr. Jones said medical researchers are still scratching the surface trying to understand legionella.

"THERE'S A possibility someone might be bringing them in, but we don't even know if there are carriers of legionella," he said. "There's nothing special about Hotel Dieu, except that it was expanding to meet the demands for service. Legionella occurs near excavations."

The bacteria were flushed from the hospital's showers with water heated to 77C (170F) for up to 30 minutes. Scalding water kills legionella.

CSO: 5420/15

CANADA

INCREASE IN REPORTED CASES OF LEPROSY DISCUSSED

Toronto THE SUNDAY STAR in English 27 Jan 85 p A24

[Text]

MONTREAL (CP) — The number of known cases of leprosy in Canada appears to be growing and there may be a substantial increase in the disease in years to come, a research scientist says.

In 1976 there were 93 reported cases, Dr. Muhammad Ishaque of the Armand Frappier Institute says, while in 1982 there were 185 — including 98 in Ontario, 23 in Quebec.

And he estimates there are likely thousands with the disease in Canada.

"The phenomenon is explained by the large waves of immigration in the last few years," Ishaque said in an interview. Of all the cases known in Canada, only one concerns a Canadian born in this country, he says.

"Contrary to what most people persist in believing, leprosy is not as contagious as many other infectious diseases. Nine out of 10 people can resist it."

That said, there is no doubt that

it is one of the most serious diseases in the world — worse than cancer, Ishaque says.

"People with cancer die in two or three years. Those with leprosy last 15 to 20 years. Leprosy mutilates and destroys its victim little by little, feature by feature, until there's nothing left."

Scientists estimate there are 15 to 20 million cases throughout the world, Ishaque says. Most are in India, Africa and southeast Asia — areas where, for lack of adequate treatment, people are banished and left to agonize.

But in Canada, where treatment is available and affordable, lepers can continue to work and function in society.

Ishaque says scientists are still looking for an effective vaccine and he is confident the bacillus that causes the disease will be cultivated. •

COLOMBIA

BRIEFS

**YELLOW FEVER OUTBREAK--Villavicencio--**Daniel Patino, a leader of the Conservative Party in Meta Department, has reported outbreaks of yellow fever in the area of Costa Rica, Meta. The official told Super Noticias that 10 cases have been reported over the past 2 months and called on government health officials to improve sanitation conditions in the area and step up vaccination campaigns to halt the spread of the disease. [Summary]  
[Bogota Cadena Radial Super in Spanish 1730 GMT 16 Feb 85 PA]

CSO: 5400/2033



FINLAND

CONCERN GROWS OVER SPREADING POLIO EPIDEMIC

Shortage of Vaccine

Helsinki UUSI SUOMI in Finnish 20 Dec 84 p 7

[Article by Sinikka Mustonen: "Already Four Confirmed Cases of Polio Paralysis and About 10 Unconfirmed: 'Vaccination of Adults Takes Vaccine Away from Children'"]

[Text] There are now four people down with polio and not quite 10 suspected of having polio. Public health officials have already ordered more vaccine, but by the end of March they will receive only enough for all persons under 18 and for a few unvaccinated adults.

"We have not ruled out 'live' vaccine to be taken in tablet form. But by the time we ordered it, it would already be a matter of having to vaccinate the whole nation against polio," Prof Kari Cantell, the head of the Virology Department of the National Health Institute, said at a press conference organized by the Central Medical Board on Wednesday.

The vaccine that has so far been used in Finland is preferred in Sweden, Norway, Iceland, the Netherlands and in parts of Canada in addition to here in Finland. Elsewhere they resort to live vaccine in the form of tablets with which they have indeed had bad experiences.

Sweden Has Accumulated a Supply but Not Finland

The so-called Salk vaccine used in Finland is no longer manufactured in many places, which is why it is hard to obtain in large quantities on short notice. Sweden has, however, accumulated a supply of the vaccine for itself, which we have not done.

Finland has been promised enough Salk vaccine for next year for only half of all Finns.

"If we now proceed according to Medical Board instructions, there will be enough vaccine for those who most need it: children and young people," Cantell said.

"Every adult who now goes and gets himself some vaccine is taking it away from some child since the amount of vaccine is limited," Cantell emphasized.

Government epidemiologist Pertti Weckstrom of the Medical Board is of the opinion that the adult population is fairly safe from polio. Those who were born before the early 1950's have developed a natural immunity to polio. Young men should also be safer from it than women since in the Army they see to it that they get shots.

#### Four Confirmed Polio Cases

There are now four cases that have definitely been classified as paralysis caused by polio. One iron lung patient is a 17-year-old from Kajaani and a second iron lung patient is a 31-year-old from Espoo. A 12-year-old from Turku's leg is paralyzed. A 31-year-old pregnant woman who has contracted infantile paralysis is also in the HYKS [Helsinki University Central Hospital].

"There are not quite 10 unconfirmed polio cases in which the virus has indeed been isolated, but not all of whose clinical contributing factors fit the picture," university lecturer Tapani Hovi of the National Health Institute said.

#### Virus Everywhere

So much polio virus has been found in different parts of the country that officials say that it has permeated the whole population.

"The vaccine does not prevent a person from being infected with the virus and, once he has been infected, he spreads it in his environment. Many people are spreading it, at least for a short time, at this very moment," Weckstrom said.

"With the vaccine, however, a person can be protected from the more serious forms of the disease; the more often the vaccine can be given the better. Full protection against paralysis cannot, however, be guaranteed."

#### It Spreads in Crowds

Polio virus spreads in contact with people as an infection transmitted by droplets. Someone coughs or sneezes and polio virus may accompany it.

"We have not even thought of travel restrictions. But, since the disease spreads through infectious droplets, the more frequent the contact, the greater the possibility of coming down with the virus. If you plan to leave on a Christmas trip, it's worthwhile considering whether the trip is worth the risk," Professor Cantell said.

He reminded us too that physical strain increases the possibility of paralysis. It is believed that a slight infection circulates freely displaying the symptoms of ordinary influenza. So those who now have sore throats and "the flu" should treat their illness with more than ordinary care and rest enough to reduce the risk of paralysis.

### Pregnancy Is a Risk in Terms of Polio

There is a shortage of vaccine in many places now, before Christmas, but the situation will be eased in early January. They may temporarily run out of vaccine on occasion after that too. At the first opportunity we must see to it that children are given a third polio shot as soon as possible.

A third shot can be given at the ages of 4.5 and 6 months.

If vaccinations have already been started, a third shot can be given a month after the second one.

An additional shot for all infants under 2 years of age. Some have already received a third vaccination; for them an additional shot will mean a fourth shot.

An additional vaccination in January and February for all pre-school-age children. An additional vaccination for all those whose third vaccination was given over 6 months ago.

Vaccinations for all who are under 18 years of age by the end of March.

The Medical Board is deliberating as to when to start vaccinating those older than that.

Adults who have not been vaccinated or have been incompletely vaccinated may get their vaccinations in connection with children's vaccinations.

Pregnancy lowers a woman's ability to resist the disease, which is why all pregnant women are poorly protected.

Children who are allergic to the polio vaccine should be taken to allergy specialists or pediatricians familiar with allergies to be vaccinated. A small quantity of vaccine without antibiotics is available.

### Vaccine Lacking in Urban Areas

Helsinki HELSINGIN SANOMAT in Finnish 21 Dec 84 p 14

[Text] There is not enough polio vaccine in the capital district for adults. In some places in the Helsinki area they ran out of it as early as 2 days ago, although vaccinations of pre-school-age children was still scheduled to continue yesterday, Thursday. Many public health station centers have been flooded with phone inquiries.

On Wednesday the Medical Board promised that adults without the protection of the polio vaccine may also go to public health stations to get shots. The main idea is, however, to continue with the original program, in line with which vaccinations will be given to schoolchildren starting in January and only then to adults.

The head nurse in charge of the control center at the Helsinki Public Health Bureau, Eini Turtiainen, described the situation as well-nigh catastrophic. Information and public health station operations have bogged down because of the inquiries. Many adults have wanted to obtain polio vaccine, although it has been impossible to give it to them without suspending vaccinations of children.

At the Myllypuro information station they posted a notice on the door as early as the second day of vaccination, Wednesday. There was still some vaccine left at some information stations.

Espoo has not extended its polio vaccinations to adults either. They ran out of vaccine so quickly that they could not even give all of their own health service personnel shots, even though the danger of infection is greater than normal for them.

At the Vantaa Public Health Bureau they heaved a sigh of relief because they got the town's own vaccination program into operation even before the rest of the country. Pre-school-age children as well as some schoolchildren have been vaccinated; the others will have to wait until next year.

There is not much vaccine left in Vantaa. As elsewhere, the next batch will be sent there on 2 January.

At the Medical Board they stressed the fact that there will not be enough polio vaccine this year for adults. "We want to seriously appeal to adults not to procure vaccine that would be taken away from children under the circumstances," chief physician Pertti Weckstrom of the Medical Board said.

"During the wave of virus infections this fall, one of the adults suffering from paralysis caused by polio was also suffering from cancer," Weckstrom said. "This serious disease lowers a person's resistance to other illnesses. It has been ascertained that some of those suffering from paralysis also have insufficient vaccination protection."

In addition to the four confirmed polio cases this fall, they suspect that polio has also caused other paralyses, the investigations of which are still incomplete. University lecturer Tapani Hovi of the National Health Institute said that, as far as he knows, there are all told less than 10 cases in the whole country in which damages to the central nervous system are confirmed or suspected to have been caused by polio.

#### A Million Doses of Polio Vaccine Ordered from the Netherlands

This week another million-dose batch of polio vaccine is being ordered from the Netherlands. Tapani Kuronen, the director of the Vaccine Department of the National Health Institute, said that 800,000 doses that were ordered from the Netherlands earlier will be administered next April.

The Dutch-made Salk vaccine is considered to be more effective than the Belgian vaccine used this winter.

The Belgian manufacturer supplied Finland with a total of 400 liters of polio vaccine in December. Since a half a milliliter of vaccine is enough for one vaccination shot, they will get 800,000 doses from this lot. Another 400-liter lot is coming from Belgium by air in January.

Every batch of vaccine must nevertheless be tested in Finland before being used. The testing takes 2 weeks.

The Salk polio vaccine is prepared from dead polio virus. Walter van der Missen, the Belgian manufacturer's representative, said that the Salk vaccine is used less throughout the world than the Sabin vaccine, which is prepared from a live virus.

Smith Cline manufactures both vaccines. "If in future Finland puts in large additional orders, more of the Sabin vaccine could perhaps be supplied faster because production of it is greater," van der Missen speculated.

A small child needs several vaccinations to acquire resistance to polio paralysis. An adult who has had polio vaccinations before acquires the ability to resist the disease in a couple of days from a booster shot. Van der Missen estimated that polio vaccinations of adults provide protection for 10 years.

#### Sweden Worried About Effects

Helsinki HELSINGIN SANOMAT in Finnish 21 Dec 84 p 14

[Article by Vesa Santavuori: "In Sweden They Are Surprised at the Wave of Polio Virus in Finland"]

[Text] Stockholm—Swedish health officials deplore the cases of polio in Finland. "I can't understand what has happened. As far as I know, no one has made a mistake. What is involved is unquestionably a calamity," an expert from Sweden's National Bacteriological Laboratory (SBL) noted to HELSINGIN SANOMAT on Thursday.

The SBL reported that the "same type" of polio vaccine is used in Sweden and Finland. The difference is, however, that Sweden has itself manufactured its vaccine since 1956 while Finland buys its vaccine from Belgium.

The Swedish vaccine is particularly effective against just the sort of polio that has now broken out in Finland. On the other hand, in Sweden in the 1950's they were still using the American vaccine, the effectiveness of which does not meet present-day requirements.

According to the SBL, the effectiveness of the new vaccines too may even vary from one batch to another. The Belgian vaccine used in Finland, on the other hand, has so far proven to be very good.



## Booster Shot for At-Risk Groups

Theoretically, there should not be a single case of polio per vaccine type in countries the size of Sweden and Finland. Sweden has indeed been fortunate, since there have been only two confirmed cases of polio here in 30 years time. "Neither of the two persons who came down with it had been vaccinated. One was infected in Mexico and the other belonged to a religious sect whose members rejected any vaccinations," they told us at the SBL on Thursday.

"Tens of thousands of people traveling from Sweden to Finland for Christmas are in certain at-risk cases being urged to get a booster shot against polio for safety's sake," Prof Lars Olof Kallings, the director of the SBL, emphasized.

According to Kallings, these vaccinations are recommended for children born in Sweden and for people living here who have gotten their polio vaccinations in Finland. Infants too may be vaccinated, but the first polio shot does not provide full protection.

They furthermore recommend additional vaccinations for Swedes who have not completed their polio vaccination series or were born between 1948 and 1960. This is because they used the American vaccine in Sweden in the 1950's.

They recommend that vaccinations be obtained because, in addition to the cases of polio noted in Finland, they have also confirmed the presence of hundreds of carriers of the disease who have no symptoms.

Kallings stressed the fact that what is involved is a safety precaution. "We don't want to needlessly spread an atmosphere of panic," he said. "Swedes' vaccination protection against polio is at the present time a good one. A certain number of people live here, however, who have received their vaccinations in other countries or are susceptible to infection for other reasons. For their protection we want to keep the flow of polio virus into Sweden as small as possible."

On Thursday DAGENS NYHETER maintained that the outbreak of polio in Finland "was expected" because vaccine has been used in Finland that does not provide "full protection" against so-called polio 3.

This week hundreds of travelers to Finland got additional shots.

According to the SBL, the appearance of the polio virus among the population in Finland and Sweden is not in itself any cause for alarm.

There are still countries in the world where polio appears constantly and people everywhere travel a great deal. This is why it is difficult to isolate carriers of the disease who have no symptoms. The most effective way of avoiding the disease is to obtain vaccinations in accordance with the instructions of officials.

## Sea Voyages Cancelled Too

The fear of polio infection is even becoming apparent on the ships that sail between Sweden and Finland. Swedes or Finns living in Sweden who are afraid of being infected have during the past few days canceled their trips and cabin reservations from Sweden to Finland.

According to information chief Hans Haggman of the Silja Line, trips have been canceled since the beginning of this week. They do not know the reason for sure, but they consider the fear of polio to be a definite dampener of travel enthusiasm. The cancellation of trips during the busy Christmas ship traffic is extremely rare.

Every year the Silja ships are fully booked down to the last available space just before Christmas. This year only a couple of fully booked ships will be coming from Sweden to Finland.

The Viking Line has also received many hesitant inquiries from Swedes about the safety of traveling to Finland. However, the company has not received any definite cancellations of trips.

## Cases in Central Finland

Helsinki HELSINGIN SANOMAT in Finnish 29 Dec 84 p 12

[Article: "Polio Suspected in Keski-Suomi Too; Two New Cases of Diphtheria in Stockholm"]

[Text] It is feared that the polio virus has also spread to Keski-Suomi: An 8-year-old girl from Suolahti was brought to the Keski-Suomi General Hospital in Jyväskylä on Thursday evening because she had come down with slight symptoms of paralysis on one side.

Dr Tapio Tervo, who heads the Keski-Suomi General Hospital, believes that the disease is something other than polio. Laboratory samples taken from the girl are to be examined at the National Health Institute in Helsinki.

A 23-year-old man who came down with paralysis symptoms just before Christmas and is being treated at Aurora Hospital is down with some disease other than polio. Polio virus was not found in his laboratory samples.

In Turku at the same time an 8-year-old child who had slight paralysis symptoms came home from Turku Municipal Hospital. "He is still suffering from slight weakness in the muscles of one leg. The disease is probably polio, but the results will not be ready until next week," said Pentti Hamminen, the doctor in charge of the municipal hospital's infectious diseases department.

So far four certain cases of polio that has resulted in paralysis have been confirmed — there are about 10 suspected cases.

In Goteborg they have not heard of a single new patient displaying the symptoms in 3 weeks. Laboratory director Matti Jahkola of the National Health Institute, who is in contact with Sweden, said on Friday that in Stockholm, on the other hand, two new diphtheria cases have cropped up.

At Aurora Hospital in Helsinki a man who traveled from Sweden to Finland for Christmas is still in isolation being examined for diphtheria. He is completely without symptoms and diphtheria has not been observed in the examinations of his samples that were made in Sweden.

#### Vaccine from Belgium

Helsinki HELSINGIN SANOMAT in Finnish 4 Jan 85 p 3

[Text] A shipment of about 800,000 doses of polio vaccine arrived in Finland from Belgium by air on Thursday evening.

Wanted at least as much as the plane's 40 passengers were the 46 barrels of polio vaccine that traveled from Brussels in the freight compartment. The remaining freight in the plane that landed at Helsinki-Vantaa Airport at 1812 hours was mainly boxes of flowers.

Packed into sturdily constructed barrels, the vaccine is the biggest lot purchased by the National Health Institute so far since the polio epidemic began to spread into Finland at the end of the fall.

The National Health Institute will test the purity of the vaccine here and also take care of its packaging. Within a couple of weeks they will start sending the vaccine to public health centers. By just the end of the month the last packages will reach their destinations in the towns.

They are now taking the number of children in the towns into greater consideration in the distribution of the vaccine. Earlier shipments were distributed according to the size of the population.

The vaccine shipment Finland has now received will ensure that we can soon start supplementary vaccinations of all children under 18 years of age too. Those adults whose vaccination protection against polio is insufficient will also receive shots as of at least the end of the month.

Booster shots for pre-school-age children will continue at public health centers starting with next week. A total of 250,000 doses of polio vaccine were sent to them on Wednesday.

11,466  
CSO: 5400/2514



FINLAND

NATIONWIDE VACCINATION AGAINST POLIO STARTS

High Risk Groups First

Helsinki HELSINGIN SANOMAT in Finnish 25 Jan 85 p 9

/Text/ Group vaccinations for defeating polio will begin on the 11th of February. First in line are certain high-risk groups who will get their vaccination shots in the hospitals or health centers. After that, distribution of the vaccine in sugar-cubes will begin for rest of the nation. The time will vary in different municipalities, but all polio vaccinations must be completed by 15 March.

In the group vaccinations for the first time we will be using the Sabin vaccine, which contains the dilute live virus. A few drops of it will be placed on a sugar-cube or directly onto the tongue.

Officials hold that the risk of side-effects from the vaccine is negligible. It is thought that a greater danger is the possible re-emergence of the disease in the fall, if many neglect taking the vaccine. Experience shows that a polio-epidemic is rarely limited to a single year.

No Vaccine For Those With Flu

The polio-vaccine is recommended for the whole nation, with a few exceptions.

The sugar-cube vaccine will not be given to small children who have not yet had three shots of polio vaccine. Adults, on the other hand, can take the vaccine though they may not have had them before.

According to the Central Medical Board, the taking of the vaccine must be postponed if one has a severe, feverish flu or a sudden stomach ailment with vomiting and diarrhea as symptoms. A bit of coughing or sore throat is not an obstacle to taking the vaccine.

Those allergic to neomycin will not be given the vaccine.

Diabetics, on the other hand, should not neglect taking the vaccine. They may take the sugar-cube, promises the Board of Medicine.

The Board of Medicine has also determined some high-risk groups who will not be receiving the sugar-cube vaccine but Salk's vaccine in an injection. They should get in touch with their doctors, who will give a dispatch to a health center or a hospital outpatient department.

High-risk groups are for example those who have received cytostat or radiation treatments within the last year. The sugar-cube vaccine will also not be administered to those who are undergoing heavy cortisone treatment. The families of these patients will also be protected against polio through the inactive Salk vaccination.

Those recovering from major surgery will not be given the vaccine containing live virus for 2 weeks. The same interval must also be observed if one has had a NPR shot, that is, the triple vaccination against German measles, measles and mumps.

#### Pregnancy No Obstacle

Pregnancy is no obstacle to vaccination, and neither is nursing, though Sabin's vaccine contains the dilute live virus. On the contrary, pregnancy is thought to increase the risk of contracting polio. Docent Tapani Hovi from the institute of public health says that extensive statistics compiled in the United States show that Sabin's vaccine does not harm fetal health.

Hovi compares the risks of the vaccine taken by mouth to the chances of dying in a traffic accident. Every day our traffic kills 2 people on the average, so the risk becomes 1:2.5 million. The serious but very rare side-effect of the Sabin vaccine is contracting polio. According to Hovi, within the Finnish populace this risk is only 1:10 million because the majority of the population has its inoculations in order, or at least is protected by symptoms viral contagion from the 1950's and 1960's.

Before the group vaccinations the municipalities will complete polio shots for those under 18, which in many places have been interrupted on account of a vaccine shortage. The oral vaccine can then be taken on the following day, even, because Salk's vaccine gives immunity within 2 days and Sabin's vaccine, like other virus-vaccines, begins to work only after about 5 days.

#### Schools and Health Centers

Helsinki's health stations will concentrate on polio vaccinations between 25 February and 15 March. Doctors' appointments may be difficult to get during that time; those taken ill suddenly, however, will be received.

Before the group vaccinations, those under 18, as well as the high-risk groups as determined by the Medical Board, will get their booster shots. A whole week has been reserved for this starting in 28 January.

Children over 4 months old will be vaccinated in the children's clinics; the time must be reserved ahead of time. Students will get their booster shots in the schools, and others under 18, in the health centers.

In Espoo, the group polio vaccinations are scheduled for immediately after the ski-vacation, between 26 February and 7 March. Vantaa will begin administering the sugar-cubes already 11 February. In both cities, schools will be reserved as sites for adult vaccinations as well.

The organizing for the vaccinations is still incomplete in most places. Apparently many cities are taking advantage of a method which was discovered to work during tuberculosis checks; that is, the vaccination days will be divided in alphabetical order according to surnames. In addition to schools and health centers, some large companies have been promised the vaccine for their staffs.

If needed, the polio vaccine can be taken elsewhere than one's place of residence. Health officials hope, however, that home municipalities will be favored: the names and social security numbers of those vaccinated will be recorded so that the Board of Health may use them to draw conclusions.

#### Polio Virus in Waste Water

The polio virus has not yet lessened its grip. "The virus has been found even in those areas where we have not suspected the disease to exist," says Tapani Hovi.

In addition to Helsinki, the polio virus has been found in the waste water of Vantaa and Espoo. There is also polio virus in the samples taken in Turku, Tampere, Pori, Kemi, Kajaani, Ylivieska and Joensuu.

Investigation by the national health institute of the waste waters of about 10 areas is still incomplete. The samples were taken around the end of the year.

New samples of waste water were taken near Helsinki about a week ago. According to the preliminary results, the polio-virus is still living in them. "This indicates that the virus has certainly not disappeared from our country. Since it is a cold time of year, it may however have weakened somewhat," speculates Hovi.

#### Vaccination Schedule Set

Helsinki HELSINGIN SANOMAT in Finnish 29 Jan 85 p 5

/Text/ On Monday the polio vaccinations were gradually begun at health centers.

By 9 February, the polio vaccinations will be administered to those who cannot be given the live vaccine orally. In this group belong for instance those with congenital immune deficiencies, those who are currently undergoing, or have undergone cytostat or radiation therapy in the past year, and for example, those who are being treated with cortisone either orally or through large areas of the skin.

A dispatch from one's own doctor to a health center is necessary in order to get the vaccination.

Currently the vaccination of those under 18 years old who did not get an extra shot between November-January is also underway.

Those under 18 years who are not covered by the public school health-care program will get vaccinated at health centers in their own areas. They will also be given the live vaccine during the general national vaccination.

A few people showed up to be vaccinated at the Vallila health center in Helsinki on Monday, but since the beginning of the week is usually crowded there anyway, those requesting it were told to come back toward the end of the week. The center is nevertheless prepared for big crowds.

Two or three patients have been to Punavuori, and even young people have called and asked for information.

The general vaccination of the populace is scheduled 25 February through 15 March. The exact vaccination times and sites will be announced in the 21 February newspapers.

12688

CSO: 5400/2518

GUINEA-BISSAU

BRIEFS

**CHILDREN VACCINATED**--A campaign of vaccination against measles, whooping cough and tetanus of children up to 5 years of age was started last week in the Cacheu region. It is directed by a basic technical health team. Women of child-bearing age will be included in the measures according to the regional coordinator of the basic health project, Comrade Henrique Caetano de Barros. [Text] [Bissau NO PINTCHA in Portuguese 1 Dec 84 p 2] 11634

**RABID DOGS' VICTIMS**--Four persons died and four were hurt after being bitten by rabid dogs during last month in the Quebo sector, it was revealed during a meeting at that locality. According to an official of the local veterinary facility, the deaths and the seriousness of the wounds of the persons bitten was due to lack of vaccines against rabies. At the meeting the officials of the sector decided to initiate a campaign to shoot all dogs that have not been vaccinated. [Excerpt] [Bissau NO PINTCHA in Portuguese 15 Dec 84 p 2] 11634

CSO: 5400/55

HONG KONG

BRIEFS

NEW SEWAGE FACILITY--Civil engineering and building work has started on the first stage of the Ma On Shan sewage pumping station, following the award of a \$39 million contract by the New Territories Development Department. The first stage will provide sewage pumping facilities from the new development to the Shatin sewage treatment works. It is part of an ongoing commitment to control pollution in the new towns. The contract includes the construction of a single-storey pumping station, about 2.7 km of pressure pipelines between Ma On Shan and the Shatin sewage treatment works, a pipe bridge across Shing Mun River, associated roads and other works. The pipe bridge will include a footpath and cycleway. [Text] [Hong Kong SOUTH CHINA MORNING POST in English 2 Jan 85 p 10]

CSO: 5440/038

KENYA

#### BRIEFS

**CHOLERA CASES CONFIRMED--**Kitui, January 30--Five positive cases of cholera have been confirmed at Kitui District hospital. Most cases, according to the district medical officer of health, Dr William Jinbo, are from Yatta division, which borders Machakos District. He declined to comment on those who have died from the disease, but said appropriate measures are being taken by the health officials to control the situation. Dr Jinbo has appealed to wananchi to observe hygienic measures such as washing hands before eating, using toilets and boiling drinking water. He also cautioned wananchi to avoid unnecessary hand shaking. He said the suspected cases of cholera should be taken to the hospital or to the nearest health centre immediately. [Text] [Nairobi KNA in English 1700 GMT 30 Jan 85 EA]

**CHOLERA CASES REPORTED--** Five people died of cholera in Kitui town and Yatta during the last week and 18 others have been hospitalised. Ministry of Health officials there are busy educating the people on how to combat the killer disease or prevent it from spreading. Confirming this yesterday, the head of Curative Services in the Ministry, Dr T.K. Siongok, said the outbreak had been reported on January 28, but the "situation is not alarming." He referred to a report issued on Monday by Kitui District's Medical Officer of Health, and said: "23 cases had been reported by Monday, and five deaths have now been confirmed." [Excerpt] [Nairobi DAILY NATION in English 6 Feb 85 pp 1, 28] Cholera has killed eight people in Trans Nzoia District and at least 30 others have been treated for the disease at the Kitale District Hospital. The Trans Nzoia acting Medical Officer of Health, Dr P.N. Nyarango confirmed that laboratory tests had indicated that those who died were cholera victims. Dr Nyarango said that three other patients were still being treated at the district hospital while others had been treated and discharged. The worst hit areas, Dr Nyarango said, were Endebes and Kitale Municipality suburbs. [Excerpts] [Nairobi SUNDAY NATION in English 3 Feb 85 p 3]

CSO: 5400/88



MALAYSIA

AEDES MOSQUITO REMAINS HEALTH THREAT

Kuala Lumpur NEW STRAITS TIMES in English 24 Jan 85 p 5

[Text]

**KUALA LUMPUR, Wed.** — The aedes mosquito continues to be a health threat and people have been told to step up measures to eradicate breeding grounds.

Any relaxation on their part would result in a recurrence of the 1982 dengue fever epidemic during which 35 people died.

The Director of the Health Ministry's vector borne disease control programme, Dr Chong Chee Tsun, said that last year, there were 347 cases of dengue fever (DF), 150 cases of dengue haemorrhagic fever (DHF), including five deaths.

This was less than in 1983 when there were 575 cases of DF, 215 cases of DHF, including ten deaths.

Dr Chong said Sarawak was the worst affected State, with 405 cases of DF, 80 cases of DHF and three deaths.

In Sabah, there were 30 cases of DF, five cases of DHF and two deaths reported last year.

Kelantan was free of the disease last year.

So far this month, there were 11 cases of DF and 17 cases of DHF in the country. Penang was the worst affected with six cases of DHF.

According to the Destruction of Disease Bearing Insects Act, 1973, any person found allowing the breeding of the aedes mosquito larvae can be fined up to \$1,000 or jailed up to three months or both.

For a second or subsequent offence, a person can be fined double the amount or jailed for one year or both. — Bernama

CS0: 5400/4352



MALAYSIA

BRIEFS

**MALARIA, LABOR INFLUX LINKED**--Kota Baru, Fri--The high incidence of malaria cases in the Ulu Kelantan district is due to the influx of labourers from other areas. This was stated today by the State Director of Medical and Health Services, Datuk Dr DHS Gill, who said the rapid development in the Ulu Kelantan district, especially in Gua Musang, had brought in many outside labourers believed to be carriers of the disease. Several deaths due to malaria had been reported in the district last year but the exact figures could not be confirmed. Datuk Dr Gill said the Health Ministry was stepping up efforts to control the spread of the disease. This included spraying anti-malaria chemicals in the disease-prone areas. Several teams from his department were spraying houses and buildings in malaria-prone areas besides giving health education to the residents there. "It is important that proper health education be given to the public to make them aware of the need for cleanliness and good hygiene." [Text] [Kuala Lumpur NEW STRAITS TIMES in English 5 Jan 85 p 3]

**CHOLERA IN SABAH**--Kota Kinabalu, Tues.--Cholera, which has infected 26 people in Kota Kinabalu and Sandakan since last month, has spread to Kudat. The State Medical Services Department said one victim had been detected. The victim, one of the 10 cholera cases reported in the State over the past one week, is from Kampung Pangaraban. Acting Deputy Director (health) Dr Rahimah Mohamed said seven cases were detected in the Sandakan district while the other two victims were from the Kota Kinabalu area. The seven cases in Sandakan were from Kampung Tanjung Pasir (two), Bokara (three) and one each from BDC and Bakau. Kampung Pondo and Inanam Laut were the affected areas in Kota Kinabalu. Dr Rahimah also said that eight carriers of the disease were detected last week. Seven of them from the Sandakan district alone. The other was from Kota Kinabalu. She said investigations showed that water from a river near Kampung Inanam Laut was found to be contaminated with the cholera virus. [Text] [Kuala Lumpur NEW STRAITS TIMES in English 6 Feb 85 p 4]

NEW CHOLERA CASES REPORTED--Kota Kinabalu, Mon--Two cases of cholera have been reported here this year. The first is a baby, 11-months-old, from 8th Mile, Jalan Labuk, Sandakan. The second is a three-year-old boy from Kampung Galam, also in Sandakan. The first case was confirmed on Jan 10, the second on Jan 12. Both victims are at Sandakan Hospital. While asking the public to take all precautions against it, acting Deputy Director of Medical Services (Sabah) Dr Rahiah Mohd Said advised them not to be unduly alarmed as the Medical Department was taking all measures to prevent the disease spreading. /Text/ /Kuala Lumpur NEW STRAITS TIMES in English 15 Jan 85 p 37

DENGUE VICTIMS REPORTED IN PENANG--Penang, Thurs--A nine-year-old girl died of dengue haemorrhagic fever on Sunday, State Health and Medical Services Director Dr Lim Keow Kheng said today. She also said that over the past two months there had been three other cases of dengue. [Text] [Penang THE STAR in English 11 Jan 85 p 4]

DENGUE VICTIMS REPORTED IN KUCHING--Kuching--Two more dengue fever cases were reported in Sarawak today, bringing the total to three so far this year. A Medical and Health Services spokesman said the victims were a 2 1/2-month-old baby boy from Kampung Subi Behen and a 50-year-old man from Kampung Remun, both in the Serian district.--Bernama [Text] [Penang THE STAR in English 11 Jan 85 p 4]

MALARIA FATALITIES IN KELANTAN--Kota Baru, Tues--Malaria claimed six lives, including a child of 18 months and two teenagers in Kelantan last year. State Director of Health and Medical Services Datuk Dr D.H.S. Gill said last year showed an increase in the number of cases. The worst-struck area was Kampung Bertam Baru, Gua Musang. Last year an estimated 4,000 suffered malaria, compared to 3,497 in 1983 and 3,004 in 1982. More than 55 percent of these occurred among children below 14 years. According to Datuk Dr D.H.S. Gill the type of malaria that is fatal is cerebral malaria which attacks the brain. He said hospital staff and teams from his department would intensify DDT spraying, conduct 'case detection' house to house and further educate the public on preventive measures. However, the public could help stop the spread as well by reporting to the nearest health centre for suspected infections and sleeping under mosquito nets. Breakdown figures for the main areas are: Gua Musang--1604, Dabong--394, Air Panas--254, Tanah Merah--222 and Kuala Krai--188. The remaining 755 were from other parts of Kelantan. [Text] [Kuala Lumpur NEW STRAITS TIMES in English 9 Jan 85 p 9]

CSO: 5400/4348

MOZAMBIQUE

BRIEFS

**CHILDREN VACCINATED AGAINST MEASLES**--Hundreds of children living in Nhangau and Chonja, suburbs of Beira, were recently vaccinated against measles, an epidemic now affecting these areas. The campaign, conducted by two brigades made up of health professionals of that city, is considered difficult because there are still many cases of the disease. Reports from a source connected to the campaign say that in spite of the fact that the outbreak is serious, efforts now undertaken by the brigades could lead to a decline during this month. The source said that "it is hoped that the work to fight the outbreak will be carried out in a few days in the two areas," and added that during the campaign some negligence on the part of relatives of the children has been confirmed, which is detrimental to the health of the children. In this connection an appeal is being made to neighborhood organizations to mobilize the mothers to take their kids to the nearest health stations to be vaccinated against measles and other diseases dangerous to children. [Text] [Beira DIARIO DE MOCAMBIQUE in Portuguese 19 Nov 84 p 2] 11634

**NAMPULA ANTI-RABIES CAMPAIGN**--For the past 2 weeks an anti-rabies campaign to vaccinate dogs has been conducted in the city of Nampula. At the beginning of the year the campaign was conducted in other regions of Nampula, that is, in Ribaue, Malema, Murrupula, Angoche and Moma. Dr Fernando Songane, chief of the Veterinary Provincial Services in Nampula, said that the current campaign in the provincial capital is intended to put an end to the high incidence of rabies among the animals. Up to now no statistical data have been revealed about the campaigns conducted at the beginning of the year in the districts, although it is known that in 1984 more dogs were vaccinated than in 1983 when 2,900 dogs were vaccinated. The campaign being carried at 40 veterinary posts, until January 1985. It is the joint responsibility of the Executive Council and the veterinary services. [Text] [Maputo NOTICIAS in Portuguese 15 Dec 84 p 2] 11634

**MOGOVOLAS VACCINATION CAMPAIGN**--The district preventive medicine brigade in Mogobolas, Nampula, recently carried out a vaccination campaign in the communal settlement of Namachepa for pregnant women and children 2 years of age or less. Women and children were also vaccinated in the settlements of Namuca, Namacurra, Natiti, Nacopa and Namacuco. Lourenco Manuel, the general health post agent in Namachepa, said that there are problems with shortages of medicines. [Excerpt] [Maputo NOTICIAS in Portuguese 11 Jan 85 p 2] 5157

NIGERIA

EXPANDED PROBLEM ON IMMUNIZATION LAUNCHED IN MANY STATES

Federal Money Allocated

Kaduna NEW NIGERIAN in English 5 Dec 84 p 16

[Article by Edet Charles]

[Text]

THE Federal Military Government has set aside the sum of 20 million Naira for immunisation programme against communicable diseases in its effort to attain the target set by the World Health Organisation (WHO) by the year 2,000.

The Minister of Health, Dr. Emmanuel Nsan stated this in Calabar, during a courtesy call on the Obong of Calabar, Edidem Eyo Bassey Ephram Adam III.

Nothing that the health of any

nation was judged by the health of its citizens, the minister remarked that for a sound health care delivery to succeed in the country, traditional rulers had a role to play by developing a cultural language in which to deliver the message to their people.

He emphasised the need for every one to join the war against total eradication of communicable diseases, and for traditional rulers to educate their people on the need for good water, food, and clean environment.

Benue, Imo, Oyo States

Kaduna NEW NIGERIAN in English 5 Dec 84 p 16

[Text]

**THREE states Benue, Imo and Oyo have launched the Expanded Programme on Immunisation (EPI) aimed at protecting infants from tetanus measles, whooping cough, tuberculosis, polio and diphtheria. They take heavy toll every year throughout the country.**

The programme is being jointly carried out by federal and state Ministries of Health in collaboration with the United Nations Children's Fund (UNICEF).

A report from Makurdi said the Military Governor of Benue State, Brigadier Atom Kpera stressed the need to re-orient and overhaul our entire health system in order to achieve health for all by the year 2000.

Speaking at the launching of the Expanded Programme on Immunisation (EPI) in Makurdi, Governor Kpera said the health system should not adopt a passive approach whereby professionals wait in hospitals for patients to come to them for treatment.

"The level of success of the Expanded Programme on Im-

## Plateau State

Kaduna NEW NIGERIAN in English 14 Dec 84 p 16

[Article by Sehinde Dagunduro]

[Text]

THE Plateau State Military Governor, Navy Captain Samuel Atukuma has advised parents in the state to utilise fully the advantage of the expanded immunization scheme to protect their children against killer diseases.

The governor who made the call on Wednesday while launching the programme in Jos said parents should ensure that their children obtained all recommended vaccinations against the six identified killer diseases.

Governor Atukuma said it was also important for parents in the state to note that a lot of money had been invested in the project and it would only be fruitful if the project was well utilized.

The governor said the government may make it compulsory for school children to show proof of vaccination against the diseases before being enrolled into schools.

The immunisation project, he

said, was of great importance to the state government and as such "we are putting in everything possible to make it succeed".

Already, the state government has opened a large cold room at the epidemiological unit to serve the entire state, while others are being provided at the local government level to serve as zonal cold stores.

In addition, the government has given out 2,000 Naira for operational services including fuelling, and maintenance of vehicles to extend the programme to rural areas.

Governor Atukuma then called on the Federal Military Government, the United Nations Children's Emergency Fund (UNICEF) and World Health Organisation (WHO) to step up their involvement to make the project a success.

## Lagos, Kano States

Kaduna NEW NIGERIAN in English 24 Dec 84 p 9

[Article by Yusuf Ozi Usmaniola Jones]

[Text]

THE expanded programme of immunization is expected to be launched in Kano State next month.

Three steering committees have been set up by the state government to prepare for the launching. The committees are on education mobilisation and public enlightenment. The first phase of the campaign will cover Kano municipal and Hadejia local government areas.

The programme is aimed at inculcating children and pregnant women against six preventable childhood diseases, and about 80 per cent of the state population would be vaccinated by 1989.

The state government has therefore appealed to traditional rulers, community and religious leaders as well as school teachers and mass media to get seriously involved in educating the people on the benefit of the programme.

Meanwhile, the expanded programme on immunization has commenced in Lagos State.

This was disclosed by the state Commissioner for Health, Dr Isaac Olushola Olude, while addressing a press conference in his office at the Ikeja secretariat.

The commissioner said that at the moment centres projected for the coverage of immunization are Lagos Mainland, Lagos Island and Shomolu local government areas.

munization will certainly serve as an indicator as to whether or not we shall achieve the goal of health for all by the year 2000", he added.

Meanwhile, the Imo State Government is to spend 12 million Naira for the implementation of the Expanded Programme on Immunisation (EPI), the state Military Governor, Brigadier Ike Nwachukwu, said on Tuesday at Emi near Owerri, at the launching of the programme.

Brigadier Nwachukwu said that the Federal Military Government was committed to minimizing infant mortality.

He said that deaths resulting from communicable diseases would be eradicated before 1990, and urged parents to make the best use of the opportunity offered by the programme.

Brigadier Nwachukwu commended the UNICEF for "its child survival revolution pro-

gramme" in the state and pledged that the government would give every material support for the success of the project.

Also on Tuesday, the Oyo State Governor, Lt-Col. Oladayo Popoola, said in Ibadan that the devastating effects of children's diseases had prompted the Ministries of Health in the country to revise the programme on immunisation.

Governor Popoola, who launched the programme in Ibadan, said that the exercise was to achieve an 80 per cent immunisation coverage of the population by 1990.

In another development, the Kaduna State Government yesterday received equipment, materials and vehicles from the United Nations Children's Fund (UNICEF) in preparation for the launching of the Expanded Immunisation Programme (EPI), in the state scheduled for next month.

#### Lagos State

Kaduna NEW NIGERIAN in English 13 Dec 84 p 3

[Text]

THE Governor of Lagos State Group Captain Gbolahan Aludashiru, has administered oral vaccines on two babies as he launched the expanded programme on immunisation in the state.

A News Agency of Nigeria (NAN) correspondent reports that under the programme, the state government aims at immunising 366,260 children from their births to 24 months old, and 202,545 pregnant women against tuberculosis, diphtheria, whooping cough, tetanus and measles within five years.

The government also intends to cover 60 per cent of its target by the end of next year and 80 per cent by 1990.

The Commissioner for Health, Dr. Olusola Olude, said at the ceremony that only the Lagos Mainland, Lagos Island and Shomolu Local Government areas would be covered fully by the end of the fourth year.

He said that N50,000 had been voted for the programme in the 1985 budget and that local governments had been mandated to provide N30,000 annually as running costs.

The commissioner said that all vaccines and materials needed for the exercise during the first year would be provided free of charge by UNICEF, in collaboration with the Federal Ministry of Health.



Immunization at these centres, he said would take place in the first two years of the programme with the zonal headquarters at the Lagos mainland local government.

Other local government areas in the state would be involved at the last three years of the programme. He said that the association would only charge parents 62 kobo per vaccination.

#### Sokoto State

Kaduna NEW NIGERIAN in English 2 Jan 85 p 7

[Text]

THE Sokoto State Governor, Brigadier Garba Duba, said in Sokoto on Monday that it was unfortunate that infant mortality rate was still much around in most parts of the country despite the high premium paid to health care delivery system by the governments of the federation.

Launching the revitalised expanded programme on immunization at Shehu Kangwa Square, the governor said that out of every 1,000 children, 100 die through attacks by one or more preventable diseases.

He said that 10,500 children and mothers would be immunized annually and gave the assurance that the Sokoto State Government would co-operate with the super-

visors to make the programme a success.

Brigadier Duba, however, called on the various communities to give maximum co-operation to health officials for the proper implementation of the programme.

The state Commissioner for Health, Mrs. Fatima Ibrahim, said that health care delivery in modern times placed more emphasis on preventive measures, which give the chance to infants to survive the most dangerous period of their lives.

Mrs. Ibrahim thanked the Federal Government and the UNICEF for providing the vaccine and some of the materials to be used during the programme.

#### Bendel Immunizes 500,000 Children

Lagos DAILY TIMES in English 15 Dec 84 p 24

[Excerpts] HALF-A-MILLION children have so far been vaccinated against communicable diseases since the pilot project of Expanded Programme on Immunisation (EPI) started in 1980 in Bendel State.

The State Governor, Brigadier J. T. Useni, disclosed this yesterday while formally launching the expanded programme on immunisation at Urhokpota Hall, Benin.

The Governor announced that in addition to the equipment provided by the Federal Government and UNICEF, the State Government also gave N15,000 to the EPI Committee in the state for a smooth take-off of the programme.

"With its take-off stage today, all children of not more than 24 months of age in the state will be immunised against the six diseases while all the pregnant women will be immunised against tetanus in a simultaneous operation".



Brigadier Useni, who promised a substantial amount to be provided in the 1985 estimate to ensure the success of EPI in the state called for active participation of all the various communities, "so that by 1990, we would have got 100 per cent coverage of the state".

Earlier, the UNICEF representative in Nigeria, Mr. Richard Reid, said that about 90 per cent of children who have not been immunised were prone to catch measles and other communicable diseases.

#### Cross River State

Lagos DAILY TIMES in English 10 Jan 85 p 19

[Excerpt] MORE than 878,000 persons in the Cross River State were immunized against various infectious diseases in 1984 as against 34,000 in 1983 the state Commissioner for Health, Mrs. Elizabeth Ekong, said in Calabar on Tuesday.

Declaring open a workshop on Expanded Programme on Immunization (EPI), Mrs. Ekong attributed the increase to general awareness of parents and guardians "who are no longer complacent with the health care of their children", because of increased infant mortality. "Despite this sharp rise in 1984, the actual percentage was not yet near the target of immunization expected by 1990, when 80 per cent of children should be immunized against diseases" she added.

The commissioner said that it was because of the need to achieve the 1990 target that an accelerated programme on immunization was being carried out, as directed by the Federal Government.

#### Oyo State Percentage

Lagos DAILY TIMES in English 25 Jan 85 p 13

[Text]

**A**BOUT 80 per cent of the children population in Oyo State will have the opportunity to be immunised by the United Nations International Children Emergency Fund (UNICEF) by the year 1990, a representative of UNICEF. Mr. Richard Reid, has said.

Presenting the 1985 World Children's Report to the Governor of Oyo State, Lt.-Col. Oladayo Popoola, yesterday in Ibadan, Mr. Reid said, given the population of children in the state, the estimated projection would be a target never before achieved in a developing country.

He said that the UNICEF was highly honoured to be associated with the state in

national Expanded Programme on Immunization (EPI), adding increased child survival would lead to a slow-down in population growth in the country.

He noted that the nation's expectation was given a prominent place in the 1985 report, because of the role she played in the programme which involved over 48 countries.

Responding, Governor Popoola said the presentation of the report to the state government would go a long way to encourage its health programme, adding that the state was very pleased with the assistance given by the UNICEF.

### Kano Allocates Money

Enugu DAILY STAR in English 18 Jan 85 p 4

[Text] THE Kano State military governor, Air Commodore Hamza Abdullahi, has said in Kano that the state government would spend N600,000 to execute the revitalised Expanded Programme on Immunisation (EPI) this year.

In an address at the launching of the programme, Air Commodore Abdullahi said that past efforts at immunising children and pregnant women against preventable diseases had failed because of lack of adequate funds and epidemiological data.

He said that the scheme was being revitalised because of the need to ensure health for all by the year 2000.

The governor commended the Dangi Pharmacy, a private drug company, for donating 25,000 vaccines to the state government, and said that such a gesture was welcomed by the government to complement its efforts.

Earlier, the state Commissioner for Health, Hajia Rabi Iliasu, said that 564,112 children and 211,549 pregnant women would be immunised in the two local government areas which had been selected for the take-off of the EPI.

She said that 714,232 children and pregnant women were immunised last year as against 208,308 in 1983, adding that a steering committee comprising Health and Ministry of Information officials had been formed to ensure the success of the scheme.

Hajia Rabi said that 154 health personnel had been trained to carry out the EPI in 34 centres within the Kano municipal and Hadejia Local Government area of the state.

She said that the EPI was specially designed to "reduce to a tolerable degree", the high rate of infant morbidity and mortality caused by poliomyelites, tetanus, tuberculosis, whooping cough, diphtheria and measles.

A representative of the UNICEF, Mr Musecin Bin-Human, said that although the Fund had put all the resources it could muster into the programme, the success of the scheme would depend on how committed the state government was to it.

Air Commodore Abdullahi later immunised two children against poliomyelitis.

## Sokoto Students Inoculate 1,500

Kano SUNDAY TRIUMPH in English 6 Jan 85 p 10

[Article by Umar Yusuf]

[Text]

IN line with the Federal Military Government's (FMG's) expanded programme on immunisation, the University of Sokoto Medical Students Association has immunised over 1,500 people in Sokoto and Argungu towns.

The president of the association, Mr. Musa Oyibo Obaje, who hinted this to Sunday Triumph, said this was part of the week long activities lined up to mark the fourth anniversary of the association. Other activities included film shows, lectures, symposia and a clean-up campaign exercise, which took them to many towns and villages and some places like markets in Sokoto.

Diseases which the students inoculated people against included measles, polio, tetanus, whooping cough, diphtheria, and tuberculosis.

Mr. Obaje thanked the state Ministry of Health for their moral and material support and co-operation.

On the question of proliferation of teaching hospitals in the country, Mr. Obaje said the last civilian administration paid very little attention to health care delivery in the country.

He, therefore, urged the present administration to come up with more positive programmes for the health of the people.

CSO: 5400/65

NIGERIA

LACK OF AWARENESS THREATENS IMMUNIZATION PROGRAM

Kaduna THE DEMOCRAT WEEKLY in English 6 Jan 85 p 15

[Article by Austin Iyashere]

[Text]

KADUNA — Poor publicity and lack of awareness at the grassroots are threatening the smooth take-off of the on-going Expanded Programme on Immunisation (EPI).

The World Health Organisation team leader here, Hapya Bilkisu Abdulrahman, complained that there was a disturbing lack of awareness of the benefits of immunisation in the rural areas and the unfounded fear that immunisation officers were tax collectors had further complicated the exercise.

She expressed the urgent need for wide publicity and information on the project to ensure that the history of hostile tax collectors did not jeopardise the health of our people in future.

Plans are now afoot for the Governor of Kaduna State, Air Vice-Marshal Usman Mu'azu to launch the programme here on January 18. The World Health Organisation hopes that the publicity that attends the launching would improve the present low level of education on the project.

Dr Y. Madaki of the WHO Immunology Department revealed that a meeting with the Kaduna joint publicity committee had been scheduled for Thursday to discuss

ways of taking knowledge of the programme to the rural areas. He said that the programme which had actually been running since 1980 had

always achieved poor results because of poor publicity and logistics. Between 1980 and 1983, the immunisation programme consumed about N20 million and barely recorded an average of 20 per cent result.

The Federal Military Government decided to re-launch the programme this year, based on the belief that immunisation provided the most effective check against most of the known child killer diseases.

The EPI currently covers tuberculosis, diphtheria, pertussis (whooping cough), poliomyelitis, measles and tetanus. Dr Madaki also revealed that they planned to immunise farmers against tetanus if the vaccines were available.

A UNICEF experiment on the efficacy of immunisation at Owo in Ondo State, is believed to have yielded very high results as the pilot programme for the current exercise. At least one child dies in the world every three seconds while several others are maimed due to one immunisable disease or the other.

NIGERIA

BRIEFS

KANO VACCINATIONS--THE Kano State Commissioner for Health, Hajiya Kabi Iliyasu, has said that about 300,000 children were vaccinated against various infectious diseases in the state between June and October last year. The commissioner told the News Agency of Nigeria (NAN) in Kano on Friday that arrangements had been completed for the launching of the expanded programme on immunisation in the state. She said the scheme would begin on an experimental basis in the Kano Municipal Local Government area and that the programme would be expanded to cover other areas "if the pilot project proved successful."  
[Text] [Kaduna NEW NIGERIAN in English 15 Jan 85 p 16]

KADUNA VACCINATIONS--A TOTAL of 256,120 children aged up to 24 months and pregnant women were vaccinated against six deadly diseases in Kaduna State last year, Commissioner for Health Malam Musa Yerima, has said. Speaking at the launching of Expanded Programme on Immunisation in Kaduna on Friday the commissioner said the children were vaccinated against tuberculosis, measles, meningitis tetanus, diptheria and whooping cough. Out of the figure, he said, 66,120 children were vaccinated against tuberculosis, 65,000 and 60,000 against measles and meningitis respectively. The commissioner said 3,000 pregnant women were vaccinated against tetanus, 36,000 against diptheria, tetanus and whooping cough and 26,000 inoculated against polio. He said with EPI being pursued vigorously at least 50 per cent of children in the state would be inoculated by next year. To ensure success, he said government had promised financial support, and therefore urged parents to co-operate by bringing their children for inoculation. He said the Ministry of Health had been buying meningitis vaccine for use while most of the EPI vaccines were provided by the Federal Government and UNICEF. [Text] [Kaduna NEW NIGERIAN in English 21 Jan 85 p 3]

CSO: 5400/67

PAPUA NEW GUINEA

MALARIA RESURGENCE BLAMED ON DDT SHORTAGE

Port Moresby PAPUA NEW GUINEA POST COURIER in English 8 Feb 85 p 3

[Text]

East New Britain is suffering a dramatic rise in malaria cases — and a doctor has blamed the provincial government.

Since it stopped the indoor spraying of DDT the figure had jumped from 13,600 in 1983 to 17,600 in 1984, said Dr Nathaniel Tavil, from Korere village.

And he slammed the idea of keeping pigs and other animals under the house to lure mosquitoes away from humans as ridiculous.

The idea — which came from provincial health secretary Dr Malcolm Bolton — was "impractical and unhealthy".

Animals were filthy and should not be allowed to wander anywhere near people's eating and sleeping places.

Dr Tavil said whoever recommended calling off the spraying had misled the government.

Spraying kept the parasite rate down to between 12 and 16 per cent for four years. Then suddenly in 1984 it went up to 34.5 per cent.

"The increase was felt throughout the Gazelle Peninsula and every family had a bout or two of malaria," Dr Tavil said.

The rate was now back to the 1960 level when there was no spraying. Despite DDT not totally eradicating the disease-carrying mosquito, spraying was still an effective control which should be reintroduced.

In fact, until a new method or vaccine was invented, it was the only way of bringing any control.

CSO: 5400/3354

PEOPLE'S REPUBLIC OF CHINA

#### INFLUENZA TYPING METHODS COMPARED

Beijing ZHONGHUA WEISHENGWUXUE HE MIANYIXUE ZAZHI [CHINESE JOURNAL OF MICROBIOLOGY AND IMMUNOLOGY] in Chinese No 5, Oct 84 pp 289-291

[Article by Guo Yuanji [6753 0337 0679], Yang Dongrong [2799 0392 2837], Wang Ping [3769 1627] and Wang Min [3769 2404], all of the Institute of Virology, China National Center for Preventive Medicine, Beijing: "Comparative Studies of Different Methods for Typing of Influenza Viruses"]

[Summary] The results of comparative studies of the sensitivity of three different methods of typing influenza viruses demonstrate that counter-immunoelectrophoresis is not only the most sensitive (30 different strains with HA titers from 1:30 to 1:1280 all gave positive results, and when the volume of allantoic fluids used for concentrating antigens was 10 ml, all the virus strains with HA titers 1:5 also obtained positive results), but also the most rapid method, the results being detectable within 2 to 3 hours. Single radial immunodiffusion is slightly less sensitive (29 out of 30 positive) and double immunodiffusion is least sensitive (30 testing strains all negative). This paper also reports that if the concentrated antigen is disrupted with SSS, Np40 or Triton X-100, the results are the same as those obtained with SLS. This rapid typing method for influenza viruses can be widely used in China.



PEOPLE'S REPUBLIC OF CHINA

NEW SPECIES OF SPOTTED FEVER RICKETTSIA IDENTIFIED

Beijing ZHONGHUA WEISHENGWUXUE HE MIANYIXUE ZAZHI [CHINESE JOURNAL OF MICROBIOLOGY AND IMMUNOLOGY] in Chinese No 5, Oct 84 pp 295-297

[Article by Wang Min [3076 3046], Li Jizuo [2621 4949 4373] and Xu Zaihai [1776 0961 3189], et al., all of the Institute of Microbiology and Epidemiology, Academy of Military Medical Sciences, Beijing: "Identification of a New Species of Spotted Fever Rickettsia Isolated from Xinjiang Uygur Autonomous Region in China"]

[Summary] The spotted fever rickettsia which was isolated from *Dermacentor nuttalli* in Jinghe County, Xinjiang Uygur Autonomous Region in China, 1974, has been identified by serological examinations (microagglutination, immunofluorescence, immunoperoxidase labeling and microcomplement fixation test), comparison with other spotted fever rickettsiae by pyrolysis gaschromatography, sensitivity test and CPE in microcellular cultures, experimental pathology on guinea pigs and ultrastructure on electron-microscopy, and the results prove that this newly isolated strain belongs to the spotted fever group (SFG) of rickettsiae and possesses species-specific properties which are obviously distinct from those of other SFG species. The identification differentiation between the Jinghe strain and *R. sibirica* was particularly emphasized in our experiments, and results indicate that the Jinghe strain is a new species of SFG rickettsia. We suggest a preliminary name for the Jinghe strain of *Rickettsia sinkiangensis*.

PEOPLE'S REPUBLIC OF CHINA

BACILLUS CEREUS STRAINS IDENTIFIED

Beijing ZHONGHUA WEISHENGWUXUE HE MIANYIXUE ZAZHI [CHINESE JOURNAL OF MICROBIOLOGY AND IMMUNOLOGY] in Chinese No 5, Oct 84 pp 298-301

[Article by Cao Ren [2580 0088] and Zhang Shourang [1728 1343 6245], et al., all of Lanzhou Institute of Biological Products, Lanzhou; Liu Guirong [0491 2710 2837], Shenyang Municipal Public Health and Epidemiology Station: "Studies on the Biological Characteristics and Serotypes of 94 Cultures of Bacillus Cereus"]

[Summary] A systematic identification was carried out on 94 strains of Bacillus cereus collected from several public health and epidemiology stations and our laboratory. Seven biotypes (I, III, V, VI, X, XI and XII) were determined. Of the strains used in this study, 63 of the 94 (67.03 percent) cultures tested were typable, 9 (9.57 percent) were provisionally typable by the biotyping scheme, and 22 strains were undetermined (23.4 percent).

A set of 11 H-sera for serotyping B. cereus has been prepared by immunizing rabbits with inactivated bacterial H-antigen of 7 determined biotypes and 4 provisional biotypes of dominant epidemic strains. The activities of these H-sera were titrated and their agglutination titer was observed to be 1:3200-1:12800. Nine of them have to be absorbed with heterologous strains in order to obtain type specific preparations. No cross reaction with other relative species, such as B. anthracis, B. mycoides, B. megatherium or B. subtilis, was observed.

The relationships between the serotype and biotype of all 94 strains were examined by SPA coagglutination assay, and the results represent a correspondence of 15 (16 percent) strains. We suggest that these sera be used in the typing of B. cereus cultures in clinical and epidemiological diagnostic work.

9717  
CSO: 5400/4119

PEOPLE'S REPUBLIC OF CHINA

BRIEFS

RECOMBINANT VACCINE VIRUS--Researchers at the Biochemistry Research Institute of the Chinese Academy of Sciences in Shanghai through the application of genetic engineering methods have successfully constructed a recombinant vaccine virus which incorporates an anti-hepatitis B surface antigen gene. The research results of this genetic research are up to advanced international levels and have opened up a new way to prevent hepatitis B in China. [Excerpts] [Beijing RENMIN RIBAO in Chinese 26 Jan 85 p 1]

CSO: 5400/4127

PORTUGAL

BRIEFS

**MINIMUM FOR HEALTH EXPENDITURES**--Last year the government spent an average of 8 contos per capita for the health of its citizens, one-quarter of the expenditure made by the European country closest to ours in that sector--Greece--where an average of 36 contos per capita was spent for health purposes. The Swedes and West Germans, in turn, were allocated an average of 140 contos per capita. In the past few years the percentage of the Portuguese GNP set aside for health purposes has amounted to about 4 percent; this rate has now dropped to 3.6 percent, contrary to what has occurred in most other European countries. [Text] [Lisbon SEMANARIO in Portuguese 12 Jan 85 p 3] 8568

**TUBERCULOSIS OUTBREAK**--Cases of tuberculosis are coming to light with increasing frequency in the municipality of Guimaraes. The textile union sounded the alarm when it reported the increasing number of individuals with tubercular meningitis, and that "the long lines waiting in front of the Guimaraes antitubercular dispensary" are ample evidence. The textile officials are calling attention to this serious situation and are insinuating that most of the cases of tubercular meningitis are associated with "physical weakness resulting from malnutrition." The union is also protesting recent increases in the price of essential foodstuffs alleging that it "is a crime to remain silent in face of the undernourishment of children who come to school with obvious signs of hunger," which frequently causes them to faint. [Text] [Lisbon DIARIO DE NOTICIAS in Portuguese 19 Jan 85 p 13] 8568

**LISBON AIDS VICTIM**--There is one more AIDS victim in Portugal. It happened the beginning of this week at the Curry Cabral Hospital in Lisbon; a man who had been hospitalized with the disease already diagnosed died there. According to a physician from this hospital, the man was a Portuguese citizen who had previously been hospitalized in Canada, where physicians had diagnosed "without the shadow of a doubt" that he was an AIDS victim. With this death, there are now two officially confirmed AIDS deaths in the country. The first was a Cape Verdian citizen who died in 1983. His disease had been confirmed in Paris, where he had traveled in search of treatment. [Text] [Lisbon O JORNAL in Portuguese 8-14 Feb 85 p 40]

CSO: 5400/2523

SOUTH AFRICA

FORTY PERCENT OF TRANSVAAL AIDS VICTIMS HAVE DIED

Johannesburg THE STAR in English 9 Feb 85 p 3

[Text]

Seven people in the Transvaal have died of Acquired Immune Deficiency Syndrome (AIDS) in the last two-and-a-half-years, according to the director of the South African Institute for Medical Research, Professor J Metz.

And, he said, less than 60 percent of AIDS victims would survive. This was based on worldwide findings.

"As far as we know there have been 15 diagnosed AIDS victims treated in the Transvaal in the past two-and-a-half years, of which more than 40 percent have died.

"The fatality figure of seven in the Transvaal agrees with the 47 percent death rate experienced among AIDS victims elsewhere," said Professor Metz.

Although overseas statistics indicate the rate of AIDS infection cases doubles monthly, there has been no manifestation of this in South Africa.

It is believed there have been five AIDS deaths in Pretoria. Five people are being treated in Durban and two in the Cape.

Professor Metz said he was not aware of the number of positively diagnosed AIDS cases in

other provinces, adding that it was not ethical to reveal the whereabouts of the patients.

A new test to detect AIDS was announced by the US Government this week. It will be available next month but has not yet been assessed in South Africa.

The test, which costs about R12, will be made available at clinics and doctors' rooms soon.

It is claimed the test could be used for screening those at high risk and discouraging them from giving blood at blood transfusion centres.

Research into effective diagnostic tests suitable for large-population screening at blood transfusion centres have been in progress in America for five years.

Medical experts have found that between five and 30 percent of these test results are erroneous.

There are diagnostic tests available in South Africa but they are as yet too elaborate for screening large population groups.

Professor J Metz, director of the SA Institute for Medical Research, said the institute had no knowledge so far of the new American test.

CSO: 5400/86

SWEDEN

NEW PARATYPHUS CASES REPORTED

Stockholm DAGENS NYHETER in Swedish 4 Feb 85 p 7

/Article by Jan Kallman: "Three New Cases of Paratyphus"/

/Text/ Three new cases of paratyphus have been discovered in Gothenburg. A total of 12 people are now ill and hospitalized.

There are also a few cases elsewhere in the country, among others Stockholm and Malmo.

"We do not know the source of the infection. But the reason for this might be the handling of food is so centralized in Sweden," says Professor Sten Ivarsson at the Clinic of Infectious Diseases of the Eastern Hospital. Sten Ivarsson says that those who are currently ill might have become infected by some imported food that would have carried the paratyphus bacterium.

Coconut?

It could, for example, be coconut or egg powder that would have come to Sweden and then, through central processing, would have been spread over the country.

Cases of paratyphus have previously been found in Sweden and it has then in almost all cases been a matter of bacteria brought from abroad.

"In the current cases we have to expect a couple of weeks care time. It works well to treat the paratyphus with antibiotics. In normal cases it is a trivial thing that passes in 6 to 7 days. This variant is a little more serious," says Sten Ivarsson.

Professor Ivarsson is of the opinion that if the patient gets to the hospital within reasonable time there is no danger. The paratyphus often begins with diarrhea that lasts a long time and causes high fever. Those infected feel generally poorly.

Within 6 days they should be in the hospital in order to receive antibiotics. Most patients come after a couple of days because the diarrhea is usually severe.

## A Fatal Disease

If the individual infected with paratyphus does not receive care the bacterium might attack both the heart and the nervous system and it might eventually lead to death.

The source of infection has thus not yet been found. That worries the health care authorities of Gothenburg, which have earlier had the same problem. Not long ago there was a search for the source of infection of diphtheria.

"It is unsatisfactory that we have not found the source of infection since we have put in so much work," says Per Haglind, who is the city physician of Gothenburg.

The Health Care Administration of Gothenburg has mapped out food stores and restaurants, where those infected have been. There are not yet any leads as to where the source of infection might be.

"That might be because the bacterium appears in such low concentrations that we miss it in our examinations," continues Per Haglind.

He also says that the term paratyphus is incorrect. A more correct term would be paratyphoid fever, which is very close to ordinary salmonella, the type of stomach disease that people often bring home with them from, for example, the Mediterranean countries.

"The interesting thing with the cases that we have here in Gothenburg is that none of these people have been abroad. It must thus have been a domestic source of infection," says Per Haglind.

9662

CSO: 5400/2521



TRINIDAD AND TOBAGO

MINISTER OF HEALTH REVIEWS PLANS, ACHIEVEMENTS

Port-of-Spain TRINIDAD GUARDIAN in English 23 Jan 85 p 16

[Excerpt] MINISTRY of Health and Environment is taking a second look at the proposed size of the paediatric hospital at the Mount Hope Medical Complex because of a vast reduction in the number of gastro enteritis cases.

Senator Dr. Neville Connell, Minister of Health and Environment, in making this announcement in the Senate on Monday, said this was due to the excellent strides made in health care in the country.

"We have to now take a second look because there may not be the need for the proposed scale as a result of the reduction in gastro enteritis and other diseases affecting children. There may not be the need for the number of beds originally proposed."

Making his contribution to the 1985 Budget Debate, Dr. Connell, who reviewed his Ministry's performance in 1984 and gave projections for 1985, had words of praise for the Leprosy Relief Association.

He noted that the Leprosarium at Chacachacare was closed down in 1984 and the ex-patients were now integrated in various communities on the mainland.

He said: "We have been able to make this possible with the commendable assistance of the Leprosy Relief Association to which we are indeed grateful."

Another achievement, the Minister noted, which the news media had so far not reported, was the provision of laser equipment at the Ophthalmology unit at the Port-of-Spain General Hospital.

The Minister, who said work would begin on the construction of the new Arima hospital this year, was optimistic that the doctors' quarters in San Fernando would be completed early in 1985.

CSO: 5440/037

UNITED KINGDOM

ALARM OVER INCREASE IN AIDS; BLOOD DONORS WARNED

London THE SUNDAY TELEGRAPH in English 3 Feb 85 p 3

[Article by Carole Dawson and Catherine Steven]

[Text]

SENIOR health officials have expressed deep concern about the continuing increase in the spread of the deadly virus Aids, following reports that the number of carriers in Britain could run into thousands.

The Department of Health this weekend issued a new leaflet to the National Blood Transfusion Service giving "important new advice" for blood donors. It instructs homosexual and bisexual men, their partners, and people who inject drugs that they must not in any circumstances donate blood.

The latest figures show that there have been 118 confirmed cases of Aids, short for acquired immune deficiency syndrome, resulting in 51 deaths. The latest victim was the Rev Gregory Richards, 37, who was chaplain of Chelmsford Prison.

Doctors fear that because of the potentially large number of people who could come into sexual contact with a single carrier, there could be thousands of cases in the next few years. The incubation period is

known to be as long as four years and a carrier's symptoms may not appear for a long time.

The majority of Aids victims are in the London area: at least 12 are being treated by St Stephen's Hospital, Chelsea. A further two are at the Ham Green isolation hospital near Bristol where their condition was said to be "stable."

A third patient in Bristol, a 28-year-old Bristol man, died last Tuesday from skin cancer which developed as a result of the Aids virus despite attempts to cure him with the anti-cancer drug Interferon.

Dr Stuart Glover who is treating the other two men aged 35 and 40, both from Bath, said an appeal had been made among the local homosexual population requesting their sexual contacts to report to their GPs. So far 20 young men have come forward but none of them has been found to be a carrier.

One of the men is suffering from fungal meningitis and the other from atypical TB. Aids victims are at risk from any infection because the body's immune system cannot fight back.

Everyone at Ham Green Hospital has been told about the treatment of the Aids patients. This includes all the ancillary staff such as porters and cleaners, who have reacted "sensibly." So far there are no reports of staff leaving as they have been told there is little risk of contracting the virus if they do not have the lifestyles of the victims.

A testing kit for the National Blood Transfusion Service could be available from America in two or three months' time. A British version may be produced by the Wellcome Foundation in six months following research at the Middlesex Hospital.

This could prevent a repeat of the case involving a donor from Bournemouth whose Aids-infected blood was used for transfusions and treatments for haemophiliacs. At least 40 people were subsequently found to have Aids antibodies in their blood.

Work is also going on in Britain, France and the United States to produce a vaccine but scientists believe that success is still years away.

CSO: 5440/039

UNITED KINGDOM

BRIEFS

MEDICAL RESEARCH CUTS--The Medical Research Council has told some of Britain's most eminent scientists for the first time that their research has been "approved but not funded," because it does not have enough money to pay for even the highest rated projects. One of the first to fall into this category is Professor Denis Noble, the physiologist, and a spokesman for the Oxford dons who objected to the granting of an honorary degree to the Prime Minister last Tuesday. His team research the effects of various substances and pacemakers on the heart. The last five-year programme of work is coming to a halt, but when he applied to the Medical Research Council for a new grant he was told that there was no money left to enable him to continue. Now he is seeking support from charities while his staff have been warned they may have to go on to half-pay. [Excerpt] [By Paul Williams] [London THE SUNDAY TELEGRAPH in English 3 Feb 85 p 4]

CSO: 5440/039

ZAMBIA

BRIEFS

**MENINGITIS KILLS SEVEN**--Seven children are reported to have died from meningitis during the past three days in Chief Kambwali's area, in Nchelenge, Luapula Province. Nchelenge acting district executive secretary Lieutenant Stephen Mwape said yesterday that typhoid was suspected to have broken out at Lambwechomba where Zairean refugees are camped and at Mantapala. [Text] [Lusaka TIMES OF ZAMBIA in English 12 Feb 85 p 1]

CSO: 5400/89

ZIMBABWE

#### BRIEFS

**KILLER VEGETABLE ALERT--**WHILE most typhoid cases being treated in Harare are contracted outside the city, 21 of the 88 reported cases in the third quarter of last year caught the disease in the city. Irrigation of vegetables with contaminated water was the main cause. The city Medical Officer of Health, Dr Lovemore Mbengeranwa, told The Herald yesterday that residents of the city should be careful where they bought vegetables, and should seek treatment for the disease quickly. The city council's health, housing and community services committee, which has studied Dr Mbengeranwa's report, was worried about the sale of food in unhygienic conditions which increased the danger of more typhoid cases. In his report Dr Mbengeranwa said his department handled 88 cases in the three months from July to September. At least 37 of these cases were referred to municipal infectious diseases hospitals by the provincial medical directorate. Of the rest 21 originated in the city and the other 51 were found to be visitors to the city after investigations by the department. [Text] [Harare THE HERALD in English 22 Jan 85 p 9]

CSO: 5400/79

AUSTRALIA

NEW FOOT ROT STRAIN PUZZLES EXPERTS

Perth THE WEST AUSTRALIAN in English 16 Jan 85 p 4

[Text] ABOUT 140,000 sheep on more than 77 farms in WA have been placed under strict quarantine because of a major outbreak of foot rot.

The new strain of foot rot is puzzling Department of Agriculture experts.

The Director of Agriculture, Mr Norm Halse, yesterday confirmed that it was the worst outbreak of the disease in 20 years.

He said the Department of Agriculture was worried about the problem.

"It is quite likely that we will never know the exact reason why it has increased," he said.

"We will be able to get it under control and reduce the number of properties under quarantine."

Mr Halse said the disease had been isolated on some of the affected properties from Albany to Northam.

There could be more properties where the outbreak was undetected.

"All our stock inspectors will be looking out for it. And as soon as farmers become aware of outbreaks we expect they will report it," Mr Halse said.

Stock on affected properties could not be sold in saleyards.

He warned farmers buying sheep to be careful not to introduce foot rot on to their properties.

Department of Agriculture inspectors would closely monitor saleyards.

Organism

"Although it is all caused by one organism, there are different strains," Mr Halse said.

"It is quite an unpleasant thing."

The mild strain caused discolouration of the hoof while the virulent strain caused hoof rot and lameness in sheep.

The new intermediate strain was isolated in WA two years ago.

"It's been building up," Mr Halse said.

Wet conditions in the lower South-West might have caused the disease to spread quickly.

The chief veterinary officer of the Department of Agriculture, Mr John Armstrong, said the department would soon launch a big campaign against the disease.

"At the end of this month or next month, conditions will be suitable for eradication" Mr Armstrong said.

Infected sheep could either be slaughtered or in less-serious cases treated with chemicals and their hooves trimmed.

Most farms would remain under quarantine until spring while regular inspections took place.

The Minister for Agriculture, Mr Evans, will visit the foot rot affected areas next week.

Mr Evans said foot rot in WA had been on the verge of eradication till the latest increase.

"The department is confident we will get on top of it but this new strain is a little bit puzzling," Mr Evans said.

CSO: 5400/4350



BANGLADESH

BRIEFS

CATTLE DISEASE EPIDEMIC--Bogra, Jan 16--Cattle diseases have broken out in an epidemic form in the flood affected areas of the district. And a large number of heads of cattle died during the last few weeks. The situation is worsening in the affected areas as poor farmers are unable to provide for treatment of their cows and goats owing to financial hardships. It may be stated that the veterinary hospitals of the district are running without sufficient medicines. A number of farmers pointed out that the government has taken up agricultural rehabilitation programme in the flood affected areas but no tangible steps are being taken to save the cattle wealth from the onslaught of various diseases. /Text/ /Dhaka THE NEW NATION in English 19 Jan 85 p 2/

CSO: 5450/0086

GHANA

BRIEFS

**BAN ON CATTLE MOVEMENT**--The Ministry of Agriculture has with immediate effect imposed a ban on the movement of cattle into, within and out of the Volta Region and the corresponding areas of the Eastern parts of the Northern and Upper East Regions. The ban which will persist until further notice is aimed at preventing the possible outbreak of rinderpest disease which has been reported among cattle in the Sola areas of the Republic of Togo. A press release issued in Accra yesterday and signed by Dr I.K. Adjei Maafo, Secretary for Agriculture, asked law enforcement agencies of the various borders of the country to enforce the ban strictly. The release called for the co-operation of each and everyone in the exercise. [Text] [Accra PEOPLE'S DAILY GRAPHIC in English 31 Jan 85 p 1]

CSO: 5400/85

KENYA

BRIEFS

CATTLE DISEASE OUTBREAK--Mandera, Jan 28--Due to an outbreak of foot and mouth disease in Mandera, quarantine has been imposed on the district, effective immediately. [Summary] [Nairobi KNA in English 0845 GMT 28 Jan 85 EA]

CSU: 5400/71

NIGERIA

BRIEFS

LIKELY RABIES OUTBREAK--EXPERTS in dog maintenance during the week sent out danger signals of a possible outbreak of the killer disease rabies. Veterinary surgeons who spoke to the Sunday Times said that lack of adequate feeding and medical care of pet and guard dogs is posing a threat to the lives of both man and dogs. The experts pointed accusing fingers at individual pet owners and private security firms that have abdicated their responsibility of keeping rabies out of our society by constantly checking their dogs with the veterinary. They warned people to be alert to report the symptoms of the disease when they said come in two forms: the dumb and furious forms. The symptoms of the disease were listed as refusal to feed, hiding in corners, profuse dripping of saliva. [Billy Okonedo] [Text] [Lagos SUNDAY TIMES in English 6 Jan 85 p 1]

CSO: 5400/67

SOUTH AFRICA

BRIEFS

COW FEVER DANGER--Cape Town--A country-wide warning has been issued by the Medical Association of South Africa against people contracting undulant fever. The chronic disease is spread by beef cattle and dairy cows and showed an increase among South African cattle, country-wide testing by the Department of Health and Welfare's veterinary services unit had shown. Their warning was published in the latest SA Medical News, a Masa publication, whose Free State branch recently pointed out this health danger. Tens of thousands of animals could be involved nationally--in some areas such as the Transvaal Highveld the infection figures run as high as 50 percent among cattle, although it is only 1,7 percent in the Western Cape. Masa warned that undulant fever was difficult to identify clinically and although not deadly could lead to chronically poor health in people. Its symptoms were tiredness, muscle pains and headaches, a lack of concentration, lost appetite and fever. And while only 79 cases were notified last year at the Department of Health and Welfare, these figures were among the highest in the world. He mentioned two major infection sources: abattoirs and fresh, unpasteurised milk of dubious origin. Abattoir and farm workers risk contracting the fever, as do consumers who buy unpasteured fresh milk. [Text] [Durban DAILY NEWS in English 17 Jan 85 p 16]

CSO: 5400/82

ZAMBIA

BRIEFS

DISEASE KILLS CATTLE--MORE than 300 heads of cattle have died in Mazabuka district since the fresh outbreak of the corridor disease this month, area governor, Mr Shadreck Mwiimbwa was told yesterday. Villagers in Chief Sianjalika and Mwanachingwala told the governor, who was accompanied on the tour of villages by area Member of Parliament, Mr Patterson Hamane that in only one month 355 heads of cattle died in chief Sianjalika and Mwanachingwala. They expressed fear that if something was not done immediately to end the cattle deaths from the killer disease then many of them are going to lose all their animals. The villagers said the government should take urgent measures to eradicate the killer disease whose effects have been aggravated by the shortage of drugs. And district veterinary officer, Mr Chacko Abrahams confirmed the fresh outbreak of the killer disease. Mr Abrahams said the situation was serious because the rate of cattle death was extraordinarily high. [Excerpt] [Lusaka ZAMBIA DAILY MAIL in English 30 Jan 85 p 5]

CORRIDOR DISEASE STRIKES CATTLE--More than 1,700 head of cattle have died during the past few weeks in Choma, Monze and Mazabuka districts following an outbreak of corridor disease, provincial veterinary officer Dr Namasivayam Blesubramanium confirmed yesterday. Dr Blesubramanium said in an interview that 1,764 head of cattle had died. Choma topping the list with 900. In Mazabuka 694 cattle were reported dead with Monze registering 170. He said the department found it difficult to control the disease because of lack of funds to buy drugs. Dr Blesubramanium appealed to Choma and Monze district councils to emulate Mazabuka council by scouting for funds to buy drugs to enable his department to control the disease. He said villagers had constructed dipping tanks on self-help basis and only three out of 65 tanks were in operation. [Text] [Lusaka TIMES OF ZAMBIA in English 8 Feb 85 p 7]

CSO: 5400/89

ZIMBABWE

## RABID DOGS PUT HARARE ON ALERT

Harare THE HERALD in English 22 Jan 85 p 9

[Text]

A SPOKESMAN for the Veterinary Department has announced that rabies was diagnosed in two stray dogs found on the outskirts of Harare last week.

He said the introduction of dogs to the Epworth area from the rural areas appeared to have been the source of the infection.

As a result, vaccinations will be carried out at various centres in Harare and all dog owners have been reminded that by law, puppies must be vaccinated at three months, at one year and within even three years thereafter.

Adult dogs had to have the first vaccination within the first month of being acquired, the second within six to nine months and then within every three years, the spokesman said.

The Harare vaccination programme will be at the following centres and dates between 10 am and 4 pm:

On Thursday it will be at the open space opposite Braeside shopping centre on Horatio Road and at Hatfield Post Office at the corner of St Patrick's and Kilwinning roads.

On Friday, Waterfalls area office, MacKenzie Road, near the fire station and Epworth Mission at Munyuki Shopping centre will be the centres.

Vaccinations will be free but a fee of 60c will be charged for dog owners who need vaccination certificates.

CSO: 5400/79



ZIMBABWE

OVER 3 MILLION CATTLE VACCINATED AGAINST ANTHRAX

Harare THE HERALD in English 24 Jan 85 p 9

[Text]

MORE than two million cattle were vaccinated against anthrax by the Veterinary Services in 1984 and farmers themselves vaccinated a further million herd.

The Director of veterinary services, Dr J. W. Thomson, yesterday told delegates to the sixth regional conference of the International Organisation to Combat Contagious Animal Diseases (OIE) that the extensive anthrax epidemic which swept through the country in 1979 and 1980 because of the breakdown of veterinary services due to the liberation war had been brought under control.

The OIE has broken down animal diseases into two categories. Diseases such as foot-and-mouth, rinderpest and Rift Valley fever are classified as A and rabies, anthrax and trypanosomiasis are in the B group. There are 11 animal diseases in the A list and 13 in the B group.

Dr Thomson said the major diseases that menaced the country's

livestock during 1984 were foot-and-mouth, lumpy skin, Rift Valley, anthrax, rabies, tuberculosis, tick-borne diseases and African horse sickness. No incidence of rinderpest, African swine fever, Newcastle and CBPP was reported last year.

He said over 500 000 cattle in the foot-and-mouth prone areas were vaccinated last year.

"An outbreak of the disease was caused by buffalo mixing with unvaccinated cattle on a ranch in the unvaccinated buffer zone. The disease spread to four other ranches before being controlled."

As a control measure 200 km of game fences and 2 000 km of cattle fences were built and in all a million vaccinations given.

There was a low incidence of lumpy skin and Rift Valley fever in Zimbabwe because of the then prevailing dry conditions. In the B diseases category, apart from anthrax, rabies and trypanosomiasis prove to be major threats but the

veterinary services were able to control them.

The department managed to push the tsetse-fly belt back and treated over 10 000 km<sup>2</sup> of tsetse-infested area with insecticide. Of that area 2 000 km<sup>2</sup> was sprayed using light aircraft and 8 000 km<sup>2</sup> by ground spraying.

About 216 000 cattle are in tsetse-infested areas and as part of the control programme 107 000 blood specimens were examined, revealing more than 11 000 positive cases.

Dr Thomson said tick-borne diseases had accounted for 730 cattle deaths during the year. The department had 2 200 dip tanks and commercial farmers a further 4 700.

African horse sickness only accounted for six deaths and more than 10 000 vaccinations were administered.

As the fight against animal diseases continued, Zimbabwe's neighbours had also been employing control measures to ensure that diseases did not encroach borders.

In Mozambique, where an estimated 80 percent

of the country's surface area is infested by four species of tsetsefly, the cattle in the hard-hit southern provinces received three-monthly vaccinations.

Mozambican veterinary institute, in addition to carrying out trypanosomiasis surveys, conducts tsetsefly rounds to assess tsetse distribution, species incidence and tsetse density in areas where livestock development is considered.

Foot-and-mouth disease, the last outbreak of which occurred in 1983 in Maputo, Gaza and Zambezi provinces, is being controlled by vaccinations.

In Zambia more than 62 000 cattle were vaccinated against rinderpest from January to August 1984 to check the introduction of the disease from other countries.

The last outbreak of foot-and-mouth was recorded in Zambia in 1981 and six percent of the national herd was vaccinated in north Zambezi, Southern and Western provinces.

CSO: 5400/79

ZIMBABWE

BRIEFS

ANTHRAX OUTBREAK IN WILDLIFE ORPHANAGE--BULAWAYO--Beset by financial difficulties, Zimbabwe's Chipangali wildlife orphanage, on the outskirts of Bulawayo, has just weathered a deadly anthrax epidemic. The founder and director of the sanctuary, Mr Viv Wilson, said he had lost four young lions and 20 other small carnivores in the outbreak. He himself had had to be treated after being bitten by a diseased cat. Donations from wildlife lovers inside and outside Zimbabwe will enable the orphanage to keep its gates open until March. [Text] [Johannesburg THE STAR in English 18 Jan 85 p 9]

CSO: 5400/79

CIUSA

#### BRIEFS

RODENTS DESTROY FARMS--Seventeen farming communities in the Akwamu Traditional Area in the Eastern Region have had their maize and cassava farms cultivated this lean season destroyed by rodents. The farmers have therefore appealed to the Ministry of Agriculture to intensify its research work into plants and crops with the view to providing appropriate chemicals that will help contain the rodents. This was disclosed at an emergency general meeting of the Akwamu Anum Boso District Council at Atimpoku by Mr Kofi A-piah, secretary of the Akwamu Traditional Council. He said in spite of applications of rodicides by the farmers, their crops were still being destroyed by the rodents which appeared immune to the chemicals. [Text] [London TALKING DRIPS in English Vol 2, No 19, 11 Feb 85 p 23]

CSO: 540C/87

GUINEA-BISSAU

BRIEFS

PLANT PROTECTION CAMPAIGN--The cochineal insect, which has attacked the plantings of cassava, which is raised in the Ondame section, will be destroyed by plant protection teams, the official for that service in the Bombo region, Victorino Gomes Indi, has told the ANG. Victorino Indi will continue his talks with people in the other areas of the Bombo sector, including Prabís and Safim. He will also take this opportunity to inventory the manioc meal which needs treatment, and to settle the matter of payment for the seed distributed last year. [Text] [Bissau NO PINTCHA in Portuguese 23 Jan 85 p 2] 5157

CSO: 5400/81

PAKISTAN

NEW PESTICIDE FOR SOIL INSECTS EVOLVED

Karachi DAWN in English 13 Feb 85 Business Supplement p 1

[Text]

KARACHI, Feb 12: The PCSIR has evolved a pesticide, stated to be effective in controlling soil insects.

The product "Petkolin" is made of petroleum cuts acquired from Attock Oil Company.

Experiments carried out at Karachi Laboratories of PCSIR as well as in fields during the last eight years have proved that the pesticide is very effective against soil nematodes, termites and mango stem borers.

Unlike spraying pesticides, petkolin is injected in soil, killing nematodes which are said to be harmful to cotton crop and other plants.

**Indigenous material**

Indigenous raw materials — petroleum cuts and chlorine — are used in the preparation of chlorinated "petkolin".

The pesticide was evaluated in 1960 against agricultural pests, in collaboration with the Pakistan Agriculture Departments of Peshawar, Lahore and Hyderabad regions as well as Agriculture Research Institutes at Faisalabad, Tarnab and Tandojam.

Because of its efficacy against a variety of insects, petkolin was registered in Pakistan in 1969 and a foreign firm was given the patent rights for its production. Accordingly, an agreement was signed between PCSIR and a DDT factory in

Nowshera for the production of petkolin on large scale, sources said.

**Potential**

But steep rise in oil prices in 1973 proved prohibitive rendering the product uneconomical. As a result, the pesticide had no chance of large scale trials on agricultural pests. However, continued research by scientists proved successful in evolving the latent potential of the pesticide.

Insecticides worth Rs 630 million and Rs 1040 million were stated to have been consumed in the country during 1983 and 1984 respectively. Sources said only 27 to 40 per cent cultivated areas were covered during these periods despite heavy imports of insecticides.

**Cotton Crop**

The cotton crop, however, consumes about 80 per cent of the imported pesticides. Petkolin, it is said, would prove economical at an estimated cost of Rs 50 per kg.

As a result, the original pilot plant with a capacity of 0.5 ton per day, commissioned in 1968, has been reactivated but with reduced capacity of 60 kg per day from ADP funding. However, efforts are in the offing to increase production.

CSO: 3400/4706

TANZANIA

ARMYWORMS ATTACK SEVEN REGIONS

Dar es Salaam DAILY NEWS in English 4 Jan 85 p 4

[Text] Seven Mainland regions have been attacked by armyworms, and farmers and agricultural experts have been called upon to take measures against the pest to save the crops.

A statement issued in Dar es Salaam yesterday by the Ministry of Agriculture and Livestock Development said, "Farmers are requested to be on the lookout so that the first instars which are vulnerable to most insecticides could be destroyed."

The insecticide situation in the country was described as good.

The statement highlighted three steps to be taken immediately:

--Nearest agricultural offices should be informed by people who spot the worms;

--Farmers who are conversant with armyworm control should kill worms without delay; and

--Armyworms found on a small spot should be manually eliminated.

The regions already under attack are Shinyanga, Kilimanjaro, Arusha, Morogoro, Mara, Ruvuma and Mtwara.

The statement said the "armyworm season" had started early this year because of a big outbreak in Kenya and wind was helping in spreading the pest.

"Millions of armyworm moths have already left outbreak foci in central and eastern provinces of Kenya and northeastern Tanzania," it said, further warning of outbreaks in Mbeya, Dodoma, Iringa and Mwanza regions.

Districts already seriously affected are Rombo, Mwanga, Moshi Rural, Hai, all districts of Arusha and Mara regions, Tunduru and Masasi, the statement said.

Meanwhile, Shihata reported that some 500 hectares of cereals had been attacked by the pest in Shinyanga Rural and Bariadi districts.

The agency quoted a report by the region's agricultural office as saying that the region's anticipated yield-tonnage would be reduced because of the armyworm outbreak.

The region projected to harvest 593,450 tonnes of foodcrops during the 1984/85 season.

On Wednesday, Britain offered 6.6m/- to finance the ongoing armyworm control project covering the period from November 1984 to October 1986.

The funds will be used to meet the costs of two British entomologists, project vehicles, equipment and supplies including training materials.

Tanzania will provide 3,136,700/- to meet local costs.

Meanwhile, the Minister for Agriculture and Livestock Development, Ndugu John Macunda, said his Ministry would evaluate the impact of the continuing short rains on agriculture this year.

Shihata reported that the Minister said sustained rains were a pointer to an increased yield. Although he did not say what the evaluation would entail, he indicated that it would start next month.

A similar exercise would be undertaken between April and May this year, he said, calling on farmers to avoid post-harvest wastes.

Dodoma Region, one of Tanzania's dry regions, is reported to have received good rains this year. The Regional Agricultural Development Officer, Ndugu Michael Mtwewe, said rains had been "good, but the true position would be known next month."

CSO: 5400/83



VIETNAM

STATUS OF CROP PESTS NATIONWIDE REPORTED

OW261432 Hanoi Domestic Service in Vietnamese 1100 GMT 25 Jan 85

[Text] According to a notice issued recently by the vegetation protection department of the Ministry of Agriculture, rice blast has ravaged the rice crop in the southern provinces and Mekong Delta, at an infestation rate of 5 to 10 percent. Leaf folders and rice gall flies have damaged the winter-spring rice crop in the central provinces and Mekong Delta. Due to the prolonged severe cold, the late-planted spring rice seedlings and the recently transplanted fifth-month rice in the northern provinces have been killed here and there. The infestation density of stem borers affecting the stalks and roots of rice seedlings still remains high, averaging from 5 to 20 per square meter. Other crops such as potatoes are infested with *Phytophthora* infestants. Green tobacco aphids are ravaging tobacco plants while *Cirphis salebrosa* and black cutworms are developing and affecting the corn crop.

It is forecast that rice blast will continue to spread and cause damage to the winter-spring rice crop in the southern provinces while leaf folders, stem borers, and pentatomid bugs will continue to cause damage. In the northern provinces, *Phytophthora* infestants, *Cirphis salebrosa*, and stem borers will continue to develop.

It is recommended that localities should properly carry out eradication work. The southern provinces should immediately stop applying nitrogenous fertilizer to the rice crop to restrict rice blast infestation. To eliminate leaf folders, the northern provinces should plant sufficient rice seedlings and protect them from being killed by cold weather. Stem borers must be completely exterminated when they are still developing in the rice seedling fields. Sanitary measures should be properly carried out in the ricefields to prevent stem borers from developing. *Cirphis salebrosa* must be promptly eradicated from the winter-spring vegetables and subsidiary and industrial crops.

CSO: 5400/4353

VIETNAM

RICE BLAST REPORTED IN CENTRAL COASTAL PROVINCES

OW171118 Hanoi Domestic Service in Vietnamese 1100 GMT 16 Feb 85

[Text] The Vegetation Protection Department of the Ministry of Agriculture recently issued an urgent notice on the current development of rice blast which has considerably affected the spring rice crop in the central coastal provinces from Nghe Tinh downward to Phu Khanh. The affected area in each province averages from 1,000 to 2,000 hectares, some of which have been seriously ravaged.

Localities should concentrate efforts on promptly detecting and eradicating rice blast with [words indistinct]. They should also pay constant attention to detecting this pest in previously ravaged areas and in the fields planted with the varieties of rice liable to rice blast in order to promptly eliminate the disease right in the bud and prevent it from spreading and causing heavy damage.

CSO: 5400/4353

ZAMBIA

BRIEFS

VIRUS ATTACKS CASSAVA--Mount Makulu Research Centre has been urged to dispatch a team of experts to Serenje to investigate a virus which has attacked cassava causing extensive damage. Central Province Permanent Secretary, Mr Ng'andu Magande confirmed yesterday that he had written to the centre asking for a team of experts following a report that cassava was being destroyed by and unknown disease in Serenje district. Serenje District Governor had reported to Provincial Political Secretary for Central Province, Mr Musole Kanyungulu that large areas of the district had been affected by the disease and requested for urgent action to be taken to contain the situation. Mr Magande said that it was important for cassava research officers to be sent to the area with a view to finding a suitable chemical to combat the disease. "The request was sent on January 28, but I do not know whether a team has been sent there as I have had no feedback from the department of agriculture," he said. The disease is believed to have emanated from Luapula Province which was attacked last year and destroyed large amounts of cassava which is the staple food for the people in the area. However, area governor, Mr Chibale Chime and the district secretariat have taken contingency measures to provide relief food to the people should the situation worsen. [Text] [Lusaka ZAMBIA DAILY MAIL in English 7 Feb 85 p 3]

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